



ANNUAL REPORTS

ON THE

HEALTH

OF THE

COUNTY BOROUGH OF DARLINGTON,

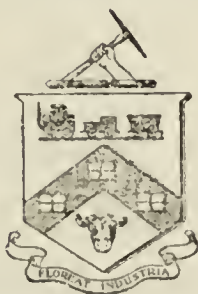
FOR THE YEAR 1928.

DARLINGTON :

The Skerne Printing Co., (1927) Limited, Garden Street, Darlington.

1929.

County Borough of Darlington.



Annual Reports

UPON THE

HEALTH OF DARLINGTON,

For the Year 1928.

G. A. DAWSON, M.D., D.P.H.

Medical Officer of Health,

Medical Superintendent of the Borough Isolation Hospitals,

School Medical Officer,

Medical Certifier under M.D. Acts.

1929.

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COUNTY BOROUGH OF DARLINGTON.

HEALTH DEPARTMENT,

FEETHAMS,

DARLINGTON.

*To the Chairman and Members of the
Health Committee.*

Gentlemen,

I have the honour to submit my Annual Report for the year ending 31st December, 1928.

In it I have set out all the work carried out by the Department not only for the Health Committee, but for the Committee for the Welfare of Afflicted Persons, the Housing Committee and others for whom the medical examinations of employes are carried out.

The Committee will agree, I think, that from the point of view of health and preventive medicine, it has been a satisfactory year. Though our birth rate is the lowest on record (15.9 per 1,000) the death rate more or less compensates in maintaining our population, with a record low figure of 10.4. The infantile mortality rate (59 per 1,000 births) is the lowest of all the North Eastern towns and considerably below that (70) for England and Wales. Even maternal deaths and the fact that two-thirds of the deaths in the first year of life occur during the first four weeks point to the importance of impressing on the public the necessity for increased ante-natal supervision to protect our motherhood.

Infectious Diseases suffered an increased incidence with few deaths, mainly by reason of their mild form, with the exception of phtheria, the eleven deaths from which are to be regretted when prompt treatment is so effective.

The milk supply, with recent improvements as the result of the Milk and Dairies Orders, and the water supply, improved by the installation of the new filters, are plentiful and safe. The conversion scheme which is now in hand to abolish the old privy pits within the next five years should improve still further the health and amenities of the area. May I suggest that the

Council take a long view in safeguarding the future well-being of Darlington, firstly, by generally improving housing accommodation by wiping out almost 200 back to back houses and secondly, by simplifying meat inspection by the crection of a central Public Slaughter House and Meat Market.

I cannot close without referring to the serious loss to the Department caused by the sudden death of Mr. J. R. Copping, Chief Sanitary Inspector and valued servant of the Corporation for twenty-six years.

I wish to express my gratitude to the Chairman and Committee, the officials of other departments, and to my colleagues who have so loyally worked to achieve what I trust you will consider a fairly successful year.

I have the honour to be,

Your obedient servant,

GEORGE A. DAWSON.

May, 1929.

SECTION I.

PUBLIC HEALTH STAFF.

G. A. DAWSON, M.D., D.P.H., Medical Officer of Health, Medical Superintendent of the Borough Isolation Hospitals, School Medical Officer, Medical Certifier under the Mental Deficiency Acts, and Medical Examiner of Corporation Employees.

*T. FERGUSON, M.D., F.R.C.P. (Ed.), D.P.H., Deputy Medical Officer of Health and Venereal Diseases Medical Officer.

*CONSTANCE CHARLOTTE ROBERTSON, M.B., B.S., (part time), Maternity and Child Welfare Medical Officer, Inspector of Midwives.

*J. R. COPPING, A.R.San.Inst., Certificated Meat Inspector, Chief Sanitary Inspector, Inspector of Meat and other Foods, Inspector of Common Lodging Houses, and under the Shops Act, Food and Drugs Act, Rag Flock Act, Rat Officer, Inspector under the Milk and Dairies Act, Inspector and Official Sampler under the Fertilisers and Feeding Stuffs Act, 1926, Officer under the Agricultural Produce (Grading and Marking) Act, 1928, and the Merchandise Marks Act, 1926. (Died 28th February, 1929).

Assistant Inspectors:—*A.E. Wade, C.R.San.Inst., and Certificated Meat Inspector; Appointed Senior Sanitary Inspector on 21st March, 1929; G. Latimer, C.R.San.Inst. and Certificated Meat Inspector; G. H. Watmough, C.R.San. Inst.

Matron of Isolation Hospitals:—Miss Flora Kinnear, State Registered Nurse; General and Fever Training Certificate.

Health Visitors:—*Miss K. Bishop, Certificates of the C.M.B. and of the R.San. Inst. for Health Visitors and School Nurses, for Maternity and Child Welfare, and for Sanitary Inspectors; *Miss L. G. R. Crawford, Certificate of C.M.B., State Registered Nurse. *Miss J. L. Bailey, New Health Visitors' Certificate of the Royal San. Inst., Certificate of C.M.B., State Registered Nurse, Fever and General Trained. (Commenced duties 1st June, 1928).

PUBLIC HEALTH STAFF—(Continued).

Clerical and Office Staff :—E. C. Stainsby, Miss F. E. Gibbon, Miss E. Stephenson, F. Ward, W. S. Smurthwaite, G. V. Penn, I. Burnley, (Commenced duties 31st May, 1928).

Borough Analyst (part time) :—C. J. H. Stock, B.Sc., F.I.C.

Venereal Diseases Orderly :—*T. Litton, (Since 3rd January, 1929, full-time orderly).

Disinfector (part-time) :—R. Johnson.

Rat Catcher (part-time) :—R. Burnside.

M. & C. W. Home Helps :—*Mrs. B. Bointon ; Also Rota of Temporary Home Helps (approved by Ministry on 12th July 1927).

* Contributions to salaries under Public Health Acts or by Exchequer Grants.

SECTION II.

GENERAL FEATURES AND STATISTICS.

The County Borough of Darlington is situated on low-lying land in the valley of the Skerne a tributary of the Tees. The subsoil consists of beds of glaciated clay with veins of sand and magnesian limestone. The height above sea level ranges from 20 to 240 feet so that its situation is somewhat like that of the centre of a saucer on account of the hills on all sides. By reason of this protected position, the climate is mild and somewhat relaxing, conducing to a profusion of vegetation, some of it tropical in nature to be found in the public parks of which there is ample provision to the extent of 200 acres.

While it is the natural centre of the neighbouring agricultural districts of Durham and the North Riding with an excellent market once a week its inhabitants are principally occupied in trades connected with railway and engineering work of world wide repute, with old established wool spinning and more recently the chemical industry at Billingham and Cockerton.

Area of the Borough.—4,614 acres.

Population.—1921 Census 65,842
Estimated, mid-year 1923 71,560

The natural increase of the population, as calculated from the difference between the birth rate and death rate amounts to 5 per thousand, a figure comparing favourably with that of previous years and also with that (4.4) for England and Wales, though below the figure (9.6) for County of Durham.

Census Statistics, 1921.—

Average Rooms per Dwelling	....	....	4.41
Families per Dwelling	....	....	1.06
Persons per Family	....	....	4.39
Rooms per Person	....	....	0.94
Number of Private Families	....	....	14,483
Structurally separate Dwellings occupied			13,634
Population living more than 2 persons to one Room	....	....	10,912
Number of Families sharing a separate Dwelling	....	....	849

This latter figure represents 5.8 per cent. of the total families, and compares with 10 per cent. for England and Wales as a whole.

Number of Inhabited Houses.—On the 1st April, 1929, the Rate Books showed Assessments as follows:—

Self-contained Dwelling-houses	....	....	15,580	
Dwelling-houses and Shops combined	....	....	694	
Tenements	....	....	492	
			<hr/>	16,766
Lock-up Shops	....	....		479
Hotels, Public Houses and Clubs	....	....		83
Schools, Institutes and Halls	....	....		63
Offices	....	....		196
Warehouses, Stables, Garages and Workshops				663
Parcels of Agricultural Land and Allotments				172
Miscellaneous	....	....		291
			<hr/>	
Total	....	....		18,713

General Rate—9/- in the £

Rateable Value.—£497,437.

Sum Represented by a Penny Rate :—

General Rate—£1,915.

VITAL STATISTICS FOR THE YEAR 1928.

			Total.		Males.	Females.
Births.—Legitimate	....	....	1,073	....	563	510
Illegitimate	....	....	67	....	32	35

Birth-rate, 15.9.

Deaths.—Total 746, Males 404, Females 342.

Death-rate, 10.4.

For 1927 the birth-rate was 16.1 and the death-rate 11. per 1,000 of the population.

Number of Women Dying in, or in consequence of Child birth.—From sepsis 3, from other causes 4.

Deaths of Infants under one year :—

			Males		Females	Rate per 1,000 birth
Legitimate	....	....	43	....	19	58
Illegitimate	....	....	3	....	2	75
Total	....	....	46	....	21	59

The bodies of 56 children **stillborn** in Darlington were buried in the town cemeteries during the year.

Deaths from Measles (all ages)	....	....	2
" " Whooping Cough (all ages)	....	....	1
" " Diarrhoea (under 2 years of age)	....	....	3

Comparative Table of Vital Statistics, 1920—1928.

Year	Birth-Rate		Death-Rate		Infant Mortality	
	Estimated Population	Darlington	England & Wales	Darlington	England & Wales	Darlington & Wales
1920	66,610	25.8	25.4	12.4	12.4	92
1921	66,400	23.9	22.4	12.3	12.1	98
1922	66,710	22.6	20.6	14.1	12.9	98
1923	67,390	21.5	19.7	11.9	11.6	67
1924	68,690	20.2	18.8	12.7	12.2	94
1925	69,130	18.6	18.3	12.7	12.2	106
1926	70,700	17.9	17.8	11.9	11.6	91
1927	71,430	16.1	16.7	11.6	12.3	67
1928	71,560	15.9	16.7	10.4	11.7	59

With a record low death rate of 10.4 per 1,000 there is no particular disease worthy of comment, and no particular occupation or environment which appears to have a prejudicial effect on the public health. As our birth rate falls there will be an increased tendency towards a higher death rate owing to a larger proportion of the population in the older age groups.

DISEASES OF THE HEART AND BLOOD VESSELS.

This group of diseases holds first place in the list. Including the deaths attributed to cerebral haemorrhage, which is so closely allied, we have to record the formidable total of 192, one fourth of the mortality from all causes. It must be understood however, that a man is as old as his arteries and that this classification is a label designating the worn-out units no longer fit to stand the strain of life.

CHEST DISEASES.

Of a total of 746 deaths assignable to Darlington, Bronchitis and Pneumonia accounted for 84 or 11.3 per cent. This represents a mortality of 1.2 per 1,000 living, showing a reduction of 30% below that of last year.

CANCER.

The study of Cancer has led to the establishment in several parts of the country of Cancer Research Committees. Leeds and Manchester have one already in operation disseminating knowledge

of the early signs of the dread disease and exhorting early consultation. Steps are now being taken to organize such work in County Durham and Newcastle, and it is suggested that Darlington should co-operate in the northern scheme.

The mortality in Darlington is 1.07 per 1,000 population, comparing favourably with England and Wales. At the end of the Report a table is appended showing the organs and the age groups most affected. The variation during the past eight years is shown in the following table :—

	<i>Deaths in Darlington</i>		<i>Death Rate per 1,000 population</i>		<i>England & Wales Death Rate</i>
1921	60	....	0.90	....	1.21
1922	67	....	1.00	....	1.22
1923	65	....	0.96	....	1.26
1924 ...	60	....	0.87	....	1.29
1925	72	....	1.04	....	1.34
1926	81	....	1.05	....	1.36
1927	96	....	1.34	....	1.38
1928	77	....	1.07	....	Not yet known

CORONER'S INQUESTS.

Thirty-two Inquests were held in the Borough and six outside the Borough in connection with deaths assignable to Darlington, a proportion of 5.1 per cent. of the total deaths. There were also fourteen inquests held in Darlington in the case of transferable deaths. One of these inquests was held in connection with 25 deaths in a railway accident.

UNCERTIFIED DEATHS.

During 1928 there were 32 deaths, the causes of which were not certified by medical practitioners or the coroner, equivalent to 4.3 per cent. of the total deaths. Seven of these were of children under one year of age.

ACCIDENTS AND VIOLENT DEATHS.

Twenty-six deaths were due to suicide, accidents or violence—8 to suicide, 7 to motor, cycle and street accidents, 5 to falls, 2 to drowning, 2 to burns or scalds, and 2 to accidents at work.

DEATHS IN INSTITUTIONS.

Feetham Poor Law Institution	....	75
General Hospital ....	....	113
Borough Isolation Hospitals	....	17
Nursing Homes	....	17
		<hr/>
Total in Darlington Institutions		222
Deaths in other Institutions, Asylums, &c.		20

BIRTHS DURING 1928.

		Births Registered	Inward Transfers	Outward Transfers
Total Births (Legitimate and Illegitimate)	{ Males	.... 606	11	22
	{ Females	.... 568	9	32
Births Illegitimate	{ Males	.... 30	3	1
	{ Females	.... 33	6	4

DEATHS IN 1928.

				Males	Females.
Registered	....	....	....	419	382
Outward Transfers	....	....	....	37	49
				<hr/>	<hr/>
				382	333
Inward Transfers	....	....	....	22	9
				<hr/>	<hr/>
Net Deaths belonging to Darlington....				404	342

SECTION III.

SOCIAL CONDITIONS.

Poor Law Relief, Unemployment and National Health Insurance.—Much useful information regarding social and economic conditions having a bearing on the health of the town is furnished in data kindly supplied by the Clerk to the Darlington Board of Guardians, the Manager of the Employment Exchange, and the Clerk to the National Health Insurance Committee.

Poor Law Relief.—The number of persons in receipt of relief on 1st January for each of the past eight years was as follows :—

	Institutions			Outdoor Relief		
	Poor Law	Asylums	Total	Widows, Sick & Disabled etc.	Unem- ployed	Total
1st Jan., 1922	273	94	367	396	192	588
" 1923	299	104	403	570	1,538	2,103
" 1924	316	119	435	709	1,793	2,502
" 1925	305	124	429	706	668	1,374
" 1926	318	128	446	752	966	1,718
" 1927	327	131	458	679	1,205	1,884
" 1928	322	132	454	487	1,175	1,662
" 1929	293	140	433	522	876	1,398

The number of assisted unemployed persons shown above is small on account of the relief work which was provided for the able-bodied men of the district.

Moreover, the Poor Law Administrative Area is not co-terminous with the County Borough and hence a few of the above persons may come from outside the Darlington Borough.

Unemployment.—The number of unemployed persons on the Live Register of the Exchange on the 31st December, 1928 was:—men 2,511; women, 302, compared with last year's figure men, 2,013; women, 174. The average number of unemployed during 1928 has been 2,160 out of approximately 27,000 employable persons.

National Health Insurance.—The total number of insured persons in the Borough was 27,128, of whom 25,714 were already on Doctors' lists. The number of prescriptions issued was 78,887 and the total cost of drugs and appliances, £2,565.

SECTION IV.

PREVALENCE OF NOTIFIABLE DISEASES.

Zymotic Diseases.—During the year there were 21 deaths compared with 40 last year, from the seven principal zymotic diseases, which are Smallpox, Measles, Whooping Cough, Diphtheria, Scarlet Fever, Diarrhoea and Fever (including Typhoid, Enteric and Typhus).

Smallpox.—As was foreshadowed last year, chiefly owing to the fact that at no time, even during the summer, was County Durham clear of smallpox, Darlington was sure to suffer. We were obliged to keep the Hospital open until September, since when it has been closed. During the first quarter the incidence of infection in County Durham was so heavy that all available accommodation was severely taxed, eighty-five cases with one death were isolated.

In every instance the infected house was visited by the Medical Officer of Health, and strict supervision of almost 800 contacts was carried out for a period of 16 days after the isolation of cases.

Under the Public Health (Smallpox Prevention) Regulations, 1917, 53 primary contacts were vaccinated by the Medical Officer of Health. These immediate vaccinations, without doubt, kept the epidemic well in check. It is still surprising to me why certain people cannot be convinced of the protective value of vaccination until they find themselves patients in the Smallpox Hospital. Every such patient left the Hospital with changed views, when he realized the immunity enjoyed by doctors, nurses and maids on the staff.

As a precaution, Chickenpox has been notifiable since 1923. Six hundred and fifty-one cases were visited and the diagnosis confirmed by a member of the Public Health staff. Sanitary Inspectors, Health Visitors, School Nurses, School Teachers, and Attendance Officers all co-operated in bringing to the attention of the Medical Officer of Health suspicious cases. Publicity was given by posters, lectures to influential bodies, school propaganda, and the Press, which afforded excellent opportunities in the tracing of contacts, and in making known the suspicious symptoms of the disease.

VACCINATION.

By reason of the increasing incidence of Smallpox all over England and the possibility that the coming winter will see its recrudescence, I have ascertained, with the assistance of Mr. Tomlin, the Vaccination Officer, the following statistics for the past six years. Darlington is a very poorly vaccinated population as far as its children are concerned, 65 per cent. of the parents having expressed their conscientious objection.

Vaccination Statistics.

	1922	1923	1924	1925	1926	1927.
Births Registered (uncorrected for transfers)	1518	1461	1423	1318	1319	1167
Successfully Vaccinated	263	377	314	277	301	293
Conscientious Objectors	1116	954	959	929	862	761
Died unvaccinated, and others	129	130	160	112	156	113
% Births vaccinated ..	17%	25%	22%	21%	23%	25%

Scarlet Fever.—Of the 326 cases notified, 316 or 97% were treated in the Hospital. There was one death. The disease was the usual mild form which has been so prevalent in recent years. The use of the new treatment with anti-scarlatinal streptococcal serum in the early severe cases has reduced not only the incidence of the many complications, but also the duration of stay in Hospital by about one half. The apparent expense of the serum is therefore more than balanced by the reduction in mortality and maintenance costs. Even discharging ears, which were formerly only too common in about 20% of the cases, were not found in any of these cases, whereas mild cases who had had no serum had an incidence of discharging ears in about 8% of the numbers thus necessitating a prolonged convalescence with the risk of future ear trouble.

The chief complications noted among the 316 patients were :—Otorrhoea 23 ; Endocarditis 5 ; Adenitis 7.

Diphtheria.—Of the 157 notified cases 152 were treated in Hospital. There were ten deaths in Hospital, and one at home. The disease was of a more severe type than last year when there were three deaths. The operation of tracheotomy was performed in three instances for laryngeal obstruction as a surgical emergency.

Diphtheria anti-toxin is supplied to general practitioners for their use in urgent cases, or while awaiting the result of bacteriological examinations. Twelve doses were provided.

The Dick and Schick tests for susceptibility to Scarlet Fever and Diphtheria respectively were not brought into use, though in the event of increased virulence or incidence of either of these diseases I would strongly recommend their application, with the subsequent immunization of those persons who were found to be susceptible.

Measles and German Measles.—These diseases exhibit a peculiarly regular wave of periodicity in alternate years, with a larger wave super-imposed about once in every seven years. Last year Darlington was comparatively clear, with only 161 notified cases with two deaths, while in 1927, 1925 and 1923 severe epidemics were experienced. Each case is visited and supervised by one of our Health Visitors. Only the first case occurring in a household within two months is notified. Five cases were treated in the Isolation Hospital.

Enteric Fever.—Four cases were notified and three were removed to the Isolation Hospital. The other case which was fatal had been nursed at home as he was too ill for removal.

Pneumonia.—Of the 140 cases of primary and influenzal pneumonia notified 15 severe cases were admitted to the Fever Hospital from homes which were considered unsuitable for proper nursing. Three of these fifteen cases died, a mortality of 20 per cent., while of the 125 cases nursed at home 49 died, a mortality of 39%.

Influenza was prevalent during the Spring and Winter, but did not reach epidemic proportions.

Whooping Cough.—Thirty-eight cases were notified and one death occurred, compared with seven in 1927. The notification of this disease serves to impress on the public the seriousness of the complications involved, and should in future lead to reduction in mortality from what is too often considered a trivial ailment from which all children must suffer.

The Queen's Nurses paid four visits to one case with pneumonia.

Puerperal Fever and Puerperal Pyrexia.—Four cases of Puerperal Fever and six cases of Puerperal Pyrexia were notified. Two of the cases of Puerperal Fever and two of Puerperal Pyrexia were removed to the Fever Hospital where a special ward has been set aside. There were no deaths from these diseases in the Fever Hospital, but three deaths were attributed to puerperal infection among patients treated at home.

On the 18th October, 1927 the Minister of Health approved of the following scheme for the nursing of Puerperal Fever and Puerperal Pyrexia :—

- (a) Home nursing by the Darlington Queen's Nurses Association at a fee of 1/- per visit.
- (b) Arrangements with the University of Durham College of Medicine, Newcastle-upon-Tyne, for bacteriological examinations at 10s. 6d. each.
- (c) Consultations with the Medical Officer of Health as required by the general practitioners.
- (d) The admission of patients to the Fever Hospital at a fee of 10s. 0d. per day, chargeable to the Maternity and Child Welfare account.
- (e) The provision of the services of a Surgeon Specialist for operative assistance where found necessary at suitable fee.

Two cases of Puerperal Fever were received into the Borough Isolation Hospital for a total of 38 in-patient days and two cases of Puerperal Pyrexia for a total of 66 in-patient days.

One case of Puerperal Fever was treated in the Feetham Infirmary.

Under their Agreement with the Health Committee the Queen's Nurses' Association paid 16 visits to two cases of Puerperal Fever, and 131 visits to 7 cases of Puerperal Pyrexia nursed at home.

Ophthalmia Neonatorum.—Fifteen cases were notified, and in one case the sight of one eye was impaired. Two cots are reserved at the General Hospital for the treatment of these cases at £3 3s. 0d. per week, chargeable to the Corporation while in use. During the year five children received in-patient treatment for 61 days at the General Hospital, one case was treated in the Feetham Infirmary, and nine were treated at home.

The Queen's Nurses paid 79 visits for home treatment.

Special instruction in prophylaxis was given to the midwives in the use of silver nitrate solution in the eyes of the new-born child. The severe case in which blindness of one eye resulted did not occur in the practice of a midwife.

Pemphigus Neonatorum.—This is an intensely infectious skin condition in the new-born child. The Queen's Nurses, paid twelve visits to two cases during the year. The outbreak was promptly checked.

Diarrhoea Under 2 years of age.—This disease, attributable usually to dirty feeding bottles or infected milk, particularly during hot weather, accounted for three deaths, representing a death-rate of about one-third that for England and Wales. It is a tribute to the commonsense of Darlington mothers that this figure is so low.

No cases of Acute Anterior-Poliomyelitis, Cerebro-Spinal Fever, Acute Polio-Encephalitis, Malaria, Dysentery, or Rabies were notified.

Encephalitis Lethargica.—This distressing disease was responsible for only one notification. This case showed some evidence of suppurative meningitis as a complication, and died this year.

Anthrax.—A case of suspected Anthrax occurred in a slaughterman employed locally. Isolation and treatment at the General Hospital prevented any further spread. The source of the infection was never definitely ascertained.

Prevention and Treatment of Blindness.—The Darlington Society for the Blind acting under the Committee for the Welfare of Afflicted persons supervises the welfare of approximately 100 blind persons in the Borough.

SECTION V.

GENERAL PROVISION OF HEALTH SERVICES.

Summary for Reference.

Professional Nursing in the Home.

- (a) The Queen's Nurses' Association receive a grant from the Council—for home nursing in which 8 nurses are employed.
- (b) Midwives—25 in practice, not subsidized.

Hospitals.

- (a) *Borough Fever Hospital* for Infectious Cases. 105 beds.
- (b) *Smallpox Hospital*. 50 beds.
- (c) *Tuberculosis*. No Hospital is provided by the Authority but the Durham County Council make arrangements for the admission of Borough cases to their own Sanatoria, to the General Hospital, Darlington, and Feetham Poor Law Institution, where there are 12 beds and 3 shelters.
- (d) *Maternity Ward*, General Hospital, Darlington. 12 beds.
- (e) *Children*. Ward at General Hospital. 25 beds.
Feetham Poor Law Institution. 40 beds.

General medical and surgical cases are received in four large Private Nursing Homes, the General Hospital with 119 beds and Feetham Poor Law Institution with 174 beds, both of the latter including beds for children.

Institutional provision for unmarried mothers and illegitimate infants and homeless children is afforded only by the Poor Law Guardians in their Institution and Cottage Homes.

Ambulance Facilities.—Infectious cases are removed to the General Hospital in the Motor Ambulance belonging to the Authority and kept at the Fever Hospital. Non-infectious and accident cases are dealt with by two Motor Ambulances kept at the Fire Station and driven by members of the Fire Brigade. They are available for calls within 15 miles of the town.

Clinics and Treatment Centres.—See under various headings.

Day Nurseries.—The Dent Memorial Nursery Day School has accommodation for about 60 children of the pre-school age. The school is visited weekly by the Assistant School Medical Officer, and any necessary treatment is carried out by the School Staff or at the School Clinic.

School Clinic.—The School Clinic at 43 Northgate has provided more suitable accommodation for the growing demands of the services provided. The building is modernly equipped with a treatment centre, consultation rooms, dental department, eye department and an X-ray apparatus for the treatment of rickets and worm.

The staff includes two Assistant School Medical Officers, one of whom attends every afternoon for consultations, one full-time Dentist, a part-time Ophthalmic Specialist, three school Nurses, and three Clerks.

Tuberculosis Dispensary.—*Feethams House.* The Tuberculosis Officer and a Nurse attend the Dispensary Tuesdays and Fridays for consultations. The scheme is administered by Durham County Council. See also under Tuberculosis.

Venereal Diseases.—Diagnosis and Treatment Clinics are held at the General Hospital, Darlington, by the Venereal Diseases Medical Officer :—

Mondays, 2—5 p.m., women and children.

Tuesdays, 10-0 a.m., 2—5 p.m., women ; 6—8 p.m., men.

Fridays, 2—5 p.m., women ; 6—8 p.m., men.

The irrigation room is open every day for intermediate treatment, which is supervised by a full time orderly.

THE INFECTIOUS DISEASES HOSPITALS.

The Borough Fever Hospital situated in Hundens Lane on the eastern side of the town is a well-built brick building, with the addition of a substantial temporary wing. It is built on the enclosed corridor plan, with excellent opportunities for the isolation of different diseases in four wings, with two large wards and several small wards in each wing. The administrative block with kitchens and staff dining room is centrally situated, giving easy access to all the wards. Several structural improvements have been made, leading to economy in service.

Calculating at the rate of 2,000 cubic feet per bed, the Hospital would contain 105 beds. The diseases treated are principally Scarlet Fever, Diphtheria, Typhoid Fever, Acute Encephalitis lethargica, Cerebro-Spinal Meningitis, Pneumonia, and such other diseases of an infectious nature which the Medical Officer of Health, who is also the Medical Superintendent, considers of serious import.

The Hospital has been recognised by the General Nursing Council and the Ministry of Health as a Training School for Probationer Nurses desiring to obtain the Fever Nurses' Certificate of State Registration. It is quite evident that great difficulty would have been experienced in finding Probationer Nurses, whereas now numerous applications for opportunities of training are being received. Had the claim for recognition not been successful we would have been obliged to employ an all-trained Nursing Staff. Forty-one lectures were given during the year in preparation for examinations.

The staff consists of Matron, four Sisters, nine Staff Nurses and Probationers, with a domestic staff of Maids as required.

A Laundry, Steam Disinfector and Motor Ambulance are provided on the premises.

The equipment was supplemented by the installation of Jesionek Artificial Sunlight Mercury Vapour Lamp for use chiefly on convalescent debilitated scarlet fever patients. The usual full treatment consists of at least five doses given at the rate of two per week, starting with a complete bodily exposure of two minutes and finishing with the patient developing a slight bronzing with 30 minutes duration. Over 100 cases received a full course of the treatment with nothing but excellent results which were highly commented upon by the grateful parents. One outstanding feature was the general feeling of high spirits amongst the patients whilst undergoing the course, and often a refractory troublesome child underwent a perfect transformation as a result. It has been an excellent investment not only in reducing the usual period of convalescence and the severity of complications even of mild scarlet fever but also in turning out contented patients and more contented parents.

Summary of the Work.

General Infectious Diseases.				Smallpox.			
		Patient				Patient	
	Cases.	Days.	Deaths.	Cases.	Days	Deaths	
Borough	497	19,350	15	87	1,771	1	
Others	143	6,030	2	1	13	0	
Total	640	25,380	17	88	1,784	1	
Average staff during year :—Nursing				....	17		
Domestic				....	19		

A total of 342 days of illness of staff was chiefly made up by a burning accident which befel one of the nurses through her own carelessness.

In May 1928 the Ministry of Health approved arrangements made by the Local Authority to treat in the Borough Isolation Hospital cases of Acute Anterior Poliomyelitis, Pneumonia and complicated cases of Whooping Cough and Measles in children under 5 years of age, at a charge of 8/- per day to the Maternity and Child Welfare account. During 1928 the following cases were nursed under this arrangement :—

	Cases	No. of In-patient days.
Acute Anterior Poliomyelitis (Children under 5)	—	—
Pneumonia (Children under 5)	2	70
Whooping Cough (under 5 years of age)	—	—
Measles (under 5 years of age)	4	102

The following Authorities have agreements for the use of our Isolation Hospitals :—

Darlington Rural District Council.

Durham County Council in respect of inmates of Dinsdale Park School.

Richmond Rural District Council.

Richmond Barracks and Catterick Camp.

Richmond Borough Corporation.

Croft Rural District Council.

Aysgarth Rural District Council.

Leyburn Rural District Council.

Royal Air Force in respect of Catterick Camp.

Darlington Queen's Nurses' Association.—Home nursing is provided by the Queen's Nurses' Association, who are supported by voluntary subscriptions and by contributions from the Durham County Council and County Borough Councils and Friendly Societies. By agreement with the Borough Council they undertake the home nursing of expectant mothers, maternity cases, case of Puerperal infection, Measles, Whooping Cough, Epidemic diarrhoea and Ophthalmia Neonatorum, at a retaining fee of £10, plus 1s. 4d. a visit, with a minimum total of £30 per annum. This is a revised arrangement suggested by the Ministry of Health, and took effect in September 1928, in substitution for the financial arrangements then in force.

In September 1920, the Council agreed in connection with their joint scheme with the Durham County Council for the treatment of Tuberculosis, to pay the sum of ten-pence per visit for tuberculous cases with open wounds nursed at home at the request of the Tuberculosis Medical Officer.

Midwifery cases are undertaken, but only at the expense of the Local Authority in so far as complications lead to additional attendances.

General Hospital, Darlington.—This is almost purely a surgical Hospital at present, as the accommodation is not sufficient for all the medical and surgical needs of the town. A new Hospital under construction on a neighbouring site of 17 acres.

The increasing demands made on the accommodation are revealed by the figures for the past eight years :—

				In-patients	Out-patients' attendances
1921	....	....	....	1,066	40,421
1922	....	....	....	1,346	43,027
1923	....	....	....	1,519	46,134
1924	....	....	....	1,563	45,638
1925	....	....	....	1,600	46,428
1926	....	....	....	1,746	48,679
1927	....	....	....	2,155	51,575
1928	....	....	....	2,290	59,262

SECTION VI.

CHEMICAL AND BACTERIOLOGICAL WORK.

Chemical examination of water supplies, milk samples, food and drugs are carried out by agreement with Mr. Cy J. H. Stock, appointed as part-time Analyst, who has kindly written the following report :—

ANNUAL REPORT OF THE BOROUGH ANALYST.

1. During the year ended the 31st December, 1928, 28 samples of Food have been submitted for analysis and report under the provisions of the Sale of Food and Drugs Acts, and the various Regulations which the Minister of Health is empowered to make from time to time.

2. I have certified 207 samples to be of genuine quality, and 28 samples to be adulterated or below standard, while 6 samples of Milk, taken in course of delivery as reference samples, and 10 samples of Milk, taken on appeal to the court, have also been reported upon.

3. Excluding reference and appeal samples, the percentage of adulteration for the year was 11.91.

4. Milk samples to the number of 114 were taken in the ordinary course of inspection under the above mentioned Acts, and 24 of these were found to be below standard, giving a figure of 21.05 for the percentage of adulteration for Milk for the period under review. In this figure are included all samples either adulterated or below standard, but reference and appeal samples are not included.

Of the 24 samples reported against, 3 were deficient in Non-fatty Solids and in Fat, 4 were deficient in Non-fatty Solids only, and 17 were deficient in Fat.

5. The commodities other than Milk which were sampled comprised Butter, Margarine, Lard, Breadmeal, Flour, Oatmeal, Coffee, Cocoa, Jam, Dried Fruits, Tinned Fruit, Sausage, Spices and Spirits.

With the exception of 4 samples submitted as "Butter," which proved to consist entirely of Margarine, no exceptions could be taken to any of these articles.

Owing to a complaint that Mercurey had been found in a tin of peaches, (actually an opened tin containing some Peaches was brought to the Health Office where Mercurey was found in the tin) an unopened tin was purchased but no evidence could be found of the presence of Mercurey in this tin, so that the Mercurey which had found an entry into the first tin had done so, no doubt, by some accidental means.

6. All samples which experience has shown to be likely to contain preservatives were examined for such additions, but no contravention of the Public Health (Preservatives, etc., in Food) Regulations was detected.

Only 7 samples were found to contain preservative but in each case the preservative was the appropriate preservative permitted by the Regulations and in no instance did the amount exceed the allowed maximum.

7. The question of the quality of Milk continues to be one of great difficulty and the number of samples which fell below the standards of the Sale of Milk Regulations, 1901, is undoubtedly too high, especially when the general average composition of the genuine samples is taken into account; the average for these samples showed :—

Non-fatty Solids	....	....	....	8.61 %
Fat	....	....	....	3.77 %

In view of these figures it is difficult to understand why so many samples, produced in the same district and, so far as can be judged, under the same conditions, were of such poor quality and especially when most of the reference and appeal samples were of satisfactory quality.

It is important that the systematic supervision of the milk supply of the town should be kept in mind.

(Signed) C. J. H. STOCK, Borough Analyst.

Bacteriological work is carried out for the Venereal Diseases Department by the Medical Officer, Dr. Ferguson, and at the Armstrong College Laboratory. The examination of sputum and the bacteriological work carried out in connection with infectious diseases generally are also undertaken at the Armstrong College Laboratory, Newcastle-upon-Tyne.

			No. of Specimens	Results	
				Positive	Negative
Tuberculosis	....	....	150	33	117
Diphtheria	....	....	152	47	105
Enteric Fever	....	....	11	3	8
Venereal Diseases	....	....	250	—	—

In addition 307 specimens were examined at the Venereal Diseases Clinic.

SECTION VII.

PUBLIC HEALTH EDUCATION.

Formal public health education is the latest departmental activity, and its conduct has received State endorsement in the Public Health Act of 1925, which empowers Local Authorities to arrange for publication of information on questions relating to health or disease, and for the delivery of lectures and display of pictures. Such public health instruction can be given individually or en masse. The Health Visitors and School Nurses have been assiduous in making use of the opportunities afforded when visiting in the homes, of imparting information on the particular problem of the moment, whether it be the feeding of the infant, its clothing, its nursing in minor infectious disease, the safeguarding of the family from infection with tuberculosis, or the guidance of the mother on her own health during pregnancy.

Addresses on health topics were delivered by the Medical Officer of Health at a number of ordinary meetings of various social, religious and educational organizations.

The local Press has always afforded valuable assistance in reporting addresses and accepting articles on current health subjects, particularly in urging the necessity of immediate preventive actions in our many little outbursts of Smallpox.

Concentrated propaganda was presented in a Health Week during November.

The Campaign proved a complete success and much exceeded my expectations in the public interest which was aroused. The response to my request for co-operation in the Health Week Movement was most gratifying and the Cinemas and Press have greatly helped in seeking to reach as many homes as possible. We look forward to a much improved "Health Conscience" in the town as a result of this intensive week's work.

In addition to many others who have willingly lent their support, I mention particularly the following —

The Press, Cinema Proprietors (especially those of the Empire and Scala), Clergy, Adult Schools, Sunday Schools, School Teachers

the various Corporation Departments, Works, Shops and other places of business in the town, the Scouts, the Girl Guides, the St. John's Ambulance Association (Women's Section), the Health and Cleanliness Council, the National Baby Week Council, the Health Week Committee appointed by the Royal Sanitary Institute, and the Dental Board of the United Kingdom.

The films, lantern slides, with much of the literature, were obtained from the Health and Cleanliness Council, the National Baby Week Council, the Dental Board of the United Kingdom, and the Health Week Committee appointed by the Royal Sanitary Institute.

The following is a brief account of what was done :—

PUBLICITY.—

Handbills.—5,000 were printed with details of the programme. These were distributed by the Health Visitors, School Medical Service, School Teachers, and Cinema Proprietors.

Posters.—500 were printed. Displayed on public hoardings, and by kind permission of those in authority displayed on notice boards at Works, Shops and other places of business in the town, Clubs, Libraries, Hotels, Corporation Departments, Halls, Cinemas, Maternity Centres, Schools, etc.

Press.—Special articles and leaders by your Medical Officer of Health and the Editors were inserted, with advertisements compiled by the Gas Works Manager, the Borough Surveyor, and various local tradesmen. The "Northern Echo" published a Special Health Page on Saturday, 3rd November, to introduce Health Week. Wide publicity was given of the Reports of the Cinema Shows, Lectures, etc.

Sunday Programme, 4th November.

Special Services were held in all Churches, Chapels, Sunday Schools, etc.

An address was given by Dr. Isobel C. Brown (Assistant School Medical Officer) at the Sunday School Meeting at the Victoria Road United Methodist Church.

Special Sermons were preached at the Parish Church in the morning by the Rev. R. Richardson, the lessons being read by your Medical Officer of Health, and in the evening by the Vicar, Rev. R. F. Drury, the lessons being read by Dr. W. W. Forsyth, Hon. Secretary of the Local Branch of the British Medical Association.

From information I have received there has been a very generous response by all the Clergy and Laymen to my appeal for their support on that day.

Cinema Shows.—Through the willing co-operation of the Managers of several Picture Theatres in the town, the films :—

“ A Brush with the Enemy ”	}	Dental Films.
“ Don't wait till it hurts ”		
“ Your Mouth ”		
“ Tommy Tucker's Tooth ”		
“ Care of the Teeth ”		
“ The Leaflet ”		
“ A Place in the Sun ”	}	Maternity and Child Welfare Films.
“ Motherhood ”		
“ The Work of an Infant Welfare Centre ”		
“ Who was to Blame ”		
“ Our Children ”		
“ Empire Builders ”		
“ Almost a Tragedy ”	}	Health and Cleanliness Films.
“ Giro the Germ ”		

“ Central Association for Mental Welfare ” Film

were shown at the Empire, Scala, Alhambra, Court, Central Hall, and the Assembly Hall Picture Houses during the week. I estimate that fully 30,000 people witnessed the exhibition of one or more of these films during the week at the special matinees or ordinary performances.

Special film shewings were held on Tuesday, Wednesday, Friday and Saturday, in addition to the special shewings at ordinary afternoon and evening performances.

Date of Shewing.	Picture Theatre.	To whom Film Shewn.	Chairman.	Attendance.
Tuesday, 6th Nov.	“ Empire.”	For Senior School girls under supervision of Teachers, and Mothers by Ticket.	The Mayor, (Coun. S. Hard- wick, J.P.)	350 Mothers. 700 Girls over 14 years of age.
Wed., 7th Nov.	“ Scala.”	For Adults only. (By Ticket)	Coun. A.J. Best.	700
Friday, 9th Nov.	“ Empire.”	For Senior School boys and girls, (under super- vision of teachers).	The Mayor, (Coun. J. F. J. Smith).	1,300
Saturday, 10th Nov.	“ Scala.”	For Scholars of Rise Carr, Harrowgate Hill, North Road Schools, and the General Public.	Coun Chandler.	700

The Students from the Training College, as well as the Elementary Schools attended these shewings.

Explanatory and introductory addresses were given by the Medical Officer of Health, and the Chairman, at these shewings

Lectures.—A Lecture organized by the Education Committee of the Darlington Co-operative Society was held on Wednesday, 7th November, at 7-30 p.m. in the Temperance Hall, under the Chairmanship of Councillor A. J. Best. The Medical Officer of Health took as his subject "Danger Signals on the Pathway of Health." The audience numbered approximately 300. A collection was taken on behalf of the General Hospital.

Educational Facilities.—Through the co-operation of the Education Committee and in order that the public should have an opportunity of seeing what was being done to fit the children to receive the full benefit from all the many educational facilities provided, the following were open for inspection during the week:—

The School Clinie.

The Maternity and Child Welfare Centres.

Alderman Leach Council School, Cockerton.

The New Roman Catholic School, Cockerton.

The Barnard School, Larchfield Street.

Fairfield Nursery School, Woodland Road.

The subject of Health was kept to the forefront in all the Schools during the week, the Handbook for Teachers, prepared by Sir George Newman, Chief Medical Officer of the Board of Education being used as the basis of the lessons.

Literature.—About 60,000 copies of booklets, leaflets, etc., dealing with the following subjects were obtained and distributed—

"What is Health Week."

"The Whys and Hows of Diet."

"Precautions to be taken in Infectious Diseases and other Ailments."

"Fly Perils."

"Hints for the Busy Housewife."

"Fairy tale for Children."

"Health Talks to Children."

"Care of the Teeth."

"Why the Clergy Should Help."

"Keys of Health."

"Health Hints for Mothers."

"Health Hints for Mothers of Sons or Daughters."

"Our Cleanliness seen by Overseas Guests."

The literature was distributed by the Health Visitors and others at the conclusion of the Cinema Showings. The Scout's Key of Health, the Cub's Key of Health, the Guide's Key, were sent for distribution to the Scout Masters and the Girl Guides, and the copies of the Scholar's Key of Health were distributed by the Education Authorities around all the Schools, each scholar being supplied with a copy,

In addition Transparent Notices

“Where there’s Dirt there’s Danger.”

were posted in the Corporation Trolley Buses and in other private buses, and through the kindness of Mr. Coverdale, the Secretary of the Darlington Chamber of Trade, who undertook the distribution, copies of this notice and another suitable leaflet were handed to Managers of places of business in the town for display in their windows.

Appropriate posters of various sizes, were displayed at the Maternity Centres, School Clinic, Health Office, Borough Accountant’s Office, and other suitable places, bearing upon health questions.

In December, the exhibition of the Social Hygiene film “The Dangers of Ignorance” drew crowded houses at each of which your Medical Officer gave a short address during the week. By the courtesy of the Health and Cleanliness Council, literature was distributed and special films were shown in the schools and on the streets by means of their travelling cinemotor outfit.

SECTION VIII.

MEDICAL EXAMINATION OF CORPORATION EMPLOYEES.

Medical examinations of members of the staff and of applicants for posts in the following Corporation Departments were made during the year by the Medical Officer of Health :—

Tramways and Transport Department	....	44
Electricity Department	....	2
Education Department	....	18
Borough Accountant’s Department	....	5
Health Department	....	3
Town Clerk’s Department	....	3
Borough Fever Hospitals	....	6
Borough Surveyor’s Department	....	31
Fire Brigade Department	....	4
Cemeteries Department	....	4
Gas Works Department	....	3
Public Library	....	1
Total	....	124

SECTION IX.

MATERNITY AND CHILD WELFARE.**CLINICAL WORK.**

The Clinical side of the work has been continued as in previous years by Dr. Constance Robertson in a most capable manner. Though a part-time general practitioner in the service, her skill and enthusiasm are given wholeheartedly as Medical Officer at the Clinics and as Inspector of Midwives with excellent results as our figures show in reduction of infantile mortality, and in increased appreciation of the mothers as revealed by attendances.

Midwives' Acts, 1902-1918.—The number of Midwives practising in Darlington during 1928 was 24 of whom 22 were fully trained, including the Sister-in-Charge of the Maternity Ward at the General Hospital. These Midwives are inspected periodically by Dr. Constance Robertson, who made 258 visits; of these 213 were routine visits, 9 were on account of cases of Ophthalmia Neonatorum, 25 for the death of the child, 8 for puerperal infection and 3 for other reasons.

During the year Midwives attended 745 births alone, and 289 under the superintendence of medical practitioners. Medical assistance was summoned on 172 occasions, including 27 cases where the Maternity Ward Sister at the General Hospital called in a Staff Doctor. The Local Supervising Authority is responsible for the payment of fees to doctors called in by Midwives, and with the continuance of trade depression and unemployment the number of such accounts received remains high. All or part of the fee is recoverable according to the financial circumstances of the patient. Medical practitioners were paid £148, of which a sum of £78 was recovered from patients during 1928. No Midwives are employed or subsidized by the Local Authority.

Milk Assistance Scheme.—Milk is granted on the Clinic Medical Officer's recommendations to infants and to expectant and nursing mothers in necessitous cases falling within a certain

income scale. During 1928—1,134 pounds of dried milk were sold at cost price, 367 were given free, and 33,950 pints of fresh milk were given free at a total cost to the Health Committee of £347. The income in all cases is verified by reference to employers and others.

Ante-Natal Clinics.—The very gratifying progress recorded in 1927, has been more than maintained during the year under review, 356 attendances being recorded compared with 245 in 1927. The importance of this work is so great that every effort is being made to increase the attendances.

Two thirds of our infantile mortality occur during the first four weeks of life, owing in great part to antecedent preventable conditions in the mothers. All women in their first pregnancy, all who have had previous miscarriages or difficult labours, and expectant mothers suffering from any abnormality during pregnancy should seek skilled medical advice with a view to appropriate treatment being obtained before an emergency has arisen.

Ante-Natal examination and keeping of records is now part of a Midwife's routine practice. 284 visits were paid by Queen's Nurses to 134 expectant mothers, in the ordinary course of their duties.

Dental Treatment for mothers and children attending the Centres was continued at the School Clinic on Saturday mornings and Mr. J. L. Liddell, School Dental Surgeon, who is carrying out the work with the approval of the Board of Education and the Ministry of Health, has kindly presented the following report:—

Mothers attending	....	....	....	....	42
Children under 4 years of age attending	....				8
					—
				Total	50
					—
Attendances	....	....	....	....	73
Extractions	....	....	....	....	201
Treatment of sockets after extractions	....				7
Sealings	....	....	....	....	2
Advice was given on three occasions.					

“I find that there is still a great deal of prejudice against dental work for the expectant mother. This however has been overcome in every case, and the work done, when the patient has attended the dental clinic, by explaining the harm that is being done to the child not yet born. One patient, almost a nervous wreck from lack of sleep, after having two aching teeth removed, informed me she

had the first night's sleep for a fortnight. Her baby was born three weeks later, and the mother's physical and mental condition were greatly improved by her good nights' rest and freedom from pain.

Incidents such as this are related to the mothers on the 'Baby Days,' held in Polam Hall; and the good effects of having a clean healthy mouth are impressed upon them. These two days are the only times when one can do some propaganda work and full advantage is taken of the opportunity.

I would like to have more mothers attending next year. As the knowledge spreads amongst those attending the Welfare Clinics, that teeth can be extracted without pain or unpleasant after effects, I hope and expect that the numbers will increase."

Maternity and Child Welfare Centres.—Five centres are in operation :—

Address	Day	Time	Average Attendance of Mothers with Babies
Hopetown Hall, Whessoe Lane	Monday	2-30 p.m.	39
Albert Road School-house	Tuesday	10-0 a.m. ; 2-30 p.m.	85
East Road Wesleyan Sunday School	Wednesday	2-30 p.m.	50
Paradise Sunday School	Thursday	10-30 a.m. ; 2-30 p.m.	82
Lockerton Wesleyan Sunday School	Friday	2-30 p.m.	26

The Ante-Natal Clinics are held in Albert Road Schoolhouse on the second and the last Thursdays of each month from 1-30 p.m. Average Attendance, 15.

The Centres have been open 267 times; 13,724 attendances have been made by mothers with babies, the average attendance being 53.

One hundred and fifty one attendances were made at our Maternity and Child Welfare Centres by mothers who reside just outside the Borough. In the cases of these mothers additional nourishment is supplied by the Durham County Council.

Average attendances of Mothers with babies at Maternity Centres during the last eight years :—

Year	Albert Road	East Road	Paradise	Hope-town	Cocker-ton
1921	69.0	35.3	58.3	25.1	—
1922	73.8	30.0	53.4	35.5	—
1923	78.9	25.1	49.1	33.0	—
1924	66.8	34.3	53.1	31.9	18.5
1925	64.9	30.2	59.4	26.9	25.0
1926	82.7	41.1	85.5	42.3	27.8
1927	85.6	38.8	82.7	28.1	22.0
1928	84.6	50.0	81.7	39.4	25.6

Total attendances of Expectant Mothers at the Maternity Centres and Ante-Natal Clinic during the last eight years :—

Year	At Maternity Centres	At Ante-Natal Clinic
1921	91	58
1922	233	73
1923	187	72
1924	190	61
1925	171	117
1926	194	244
1927	208	245
1928	149	356

Home Help.—One permanent home help and a rota of part-time home helps carry out this work while the mother is incapacitated. Charges are made according to financial conditions. Forty-nine applications were made for their services ; attendance was provided in 44 cases, at which service was given for 811½ days almost double last year's figure.

The daily charges for the services of the Maternity Home Helps are as follows :—

Where the income of a family exceeds 15/- per head per week the charge to be 3/- per day.
 exceeds 12/- and not 15/- per head per week the charge to be 2½/- per day.
 exceeds 9/- and not 12/- per head per week the charge to be 1/6 per day.
 Where the income is less than 9/- per head per week the charge to be 9d. per day.

Cases of extreme poverty are considered by the Special Sub Committee.

In all the above cases the income is understood to be the average weekly income of the family, after deducting rent and rates, for the four weeks previous to the application.

Maternity Bags.—These bags, containing all the linen and other necessities to assist in an aseptic confinement, were applied for and lent in 15 cases. In 14 cases the bags were returned in good condition but in the other case the usual deposit of 2/6 was not refunded, the bag having been retained over the period for which it was lent and then returned unwashed.

Baby Day Celebrations.—As in previous years, and through the kindness of Mrs. Baynes, these celebrations, organized by the Voluntary Committee, were held in Polam Hall grounds, on 31st July, and 1st August. 455 mothers with their children were entertained to tea. In addition 73 visitors paid for admission and their tea.

Talks on Health, Hygiene and Care of the Teeth were given by Dr. Constance Robertson's Locum, (Dr. Nicholson), Dr. MacIntyre, Mr. J. L. Liddell the School Dental Surgeon, the Health Visitors and the Medical Officer of Health Dr. G.A. Dawson. Competitions in Handicrafts among the mothers were special features and the work was exhibited, as also models, showing the proper and hygienic way of feeding and dressing children. A sale of useful garments given by members took place. These outings are much appreciated and assist markedly in the Maternity and Child Welfare enthusiasm.

Maternal Mortality.—On the receipt of notice of a maternal death, either through the local registrar or other means, an investigation and report is completed on the lines suggested by the Special Committee set up at the suggestion of the Ministry of Health, and the British Medical Association. These detailed particulars in the seven cases of maternal deaths were prepared by the Medical Officer of Health in consultation with the Doctor or Midwife in charge of the case, and then forwarded to the Ministry as directed.

Puerperal Infection.—Four cases of Puerperal infection were admitted to the Fever Hospital for treatment. All four successfully recovered.

The arrangements made last year for home nursing and medical assistance still hold, but it is interesting to report that the institutional treatment at the Fever Hospital is sought early, and so far with encouraging results.

Deaths under one month.—Though the death-rates of children under one year have fallen during the last 50 years from 160 to 59 per 1,000 births, no appreciable reduction has taken place in the case of babies under four weeks.

NEO-NATAL DEATH RATE PER 1,000 BIRTHS.

	1928	1927	1926	1925	1924	1923	1922
Births	1140	1148	1269	1288	1389	1446	1505
Death Rate	39·50	30·49	44·13	41·15	37·44	29·05	33·22
Actual Deaths	45	35	56	53	52	42	50

Average 1922-27 :

Rate	35·80
Actual Deaths	48·00

There is therefore a relative increase during 1928 in the death-rate of children under four weeks, compared with the average death-rate during the previous six years, all pointing to the necessity for further diligence in the care of the expectant mother.

Maternity Ward, General Hospital.—This department, containing 12 beds, 2 of which are for isolation purposes, for the provision and maintenance of which the Borough Council are financially responsible, was opened in 1921. The patients are expected to contribute according to their means towards their maintenance and treatment. The number of admissions is increasing gradually, though there is still much unwillingness on the part of expectant mothers to enter a hospital for their confinement.

During the year there were 109 patients admitted with four still in the ward from the previous year. The average duration of stay was 12·8 days. The midwives delivered 89, and in 20 cases the assistance of a doctor was necessary. There was one case of Ophthalmia Neonatorum. All the infants were breast-fed except one.

There were three maternal deaths from Eclampsia, three stillbirths and three deaths from prematurity.

Dried and Fresh Milk Supplied through Maternity Centres during the last seven years :—

Year	Dried Milk sold to Mothers lbs.	Dried Milk given free to mothers. lbs.	Fresh Milk given free to mothers. pints	Net Cost of Fresh & Dried Milk Supplied.
1921	7,264	2,200	5,432	£316
1922	4,286	1,844	27,110	£399
1923	4,332	896	23,129	£282
1924	4,831	959	15,195	£170
1925	3,486	736	20,615	£248
1926	4,719	1,537	40,009	£529
1927	2,248	611	36,284	£417
1928	1,134	367	33,950	£347

There are no **Day Nurseries** in Darlington. A description of the work done at the Nursery School and the School Clinie will be found in the Report of the School Medical Officer.

WORK OF THE HEALTH VISITORS.

During the year the Health Visitors paid the following visits:—

First visits to Infants under one year	....	1,091
Re-visits to Infants under one year	....	1,174
Children one to five years	....	1,606
Cases of Measles, one to five years	....	89
" " over five years	....	66
" Chickenpox	....	361
" Whooping Cough	....	52
" Ophthalmia Neonatorum	....	45
" Infant Death	....	55
" Still-birth	....	42
" Puerperal Fever	....	1
" Puerperal Pyrexia	....	2
Expectant Mothers, first visits	....	174
" " re-visits	....	127
Maternal Deaths	....	4
Cases of Mental Deficiency	....	78
Miscellaneous Visits	....	221

Unnotified Births.—An appreciable reduction in the number of births unnotified within thirty-six hours of birth from 71 in 1927 to 46 in 1928 is worthy of comment. Early notification has always been a powerful agent in putting our Health Visitors in a timely touch often to prevent a premature weaning or other improper action on the part of an ignorant or careless mother.

Breast Feeding.—Out of 516 children born during the year and attending the centres only 41 were not breast fed.

Midwives calls to Doctors.

Summary of the causes for sending for Medical help.

	1921	1922	1923	1924	1925	1926	1927	1928
Mother :—								
Torn Perineum	9	8	16	19	20	18	32	18
Prolonged, Tedious or Difficult Labour	24	23	30	31	24	18	24	32
Faulty Presentations	—	—	—	—	—	7	10	—
Impactions	—	—	—	—	—	4	3	—
Hæmorrhages	4	2	1	8	4	4	10	1
Rise of Temperature	4	6	2	4	11	7	4	—
Adherent Placenta	1	5	8	4	8	8	1	—
Albuminuria	—	—	—	1	—	1	6	—
Phlebitis	—	—	—	—	—	1	1	—
Abortion	—	—	—	3	5	8	5	1
Contracted Pelvis	—	—	—	—	—	2	2	—
Eclampsia	—	—	1	—	—	3	—	—
Prolapse of Cord	—	—	—	—	—	2	—	—
Miscellaneous	—	2	1	9	5	11	10	1
Total ...	42	46	59	79	77	94	108	111
Child :—								
Discharging Eyes	17	10	5	5	6	8	13	—
Debility, Feebleness, etc.	1	4	2	3	6	2	1	—
Prematurity	5	13	13	3	5	5	10	—
Malformations	3	3	2	4	4	1	1	—
Convulsions and Fits	5	2	2	3	5	—	4	—
Suffocation	—	—	—	—	1	—	2	—
Miscellaneous	2	1	—	4	1	12	5	—
Total ...	33	33	24	22	28	28	36	—

The following Table shows how the charges for the above cases had been dealt with at the conclusion of each year since 1921 :—

	1921	1922	1923	1924	1925	1926	1927
No Account received by Health Committee from Doctor	47	43	39	45	47	43	40
Accounts sent in to Health Committee	28	36	44	56	58	79	104
Whole Fee refunded by Patient	5	7	16	13	14	17	21
Whole Fee remitted by Health Committee	4	6	8	6	16	24	21
Fee or part of Fee still owing	17	23	19	33	14	30	58
Part Fee remitted, remainder or part still owing	—	—	1	3	12	5	3
Part Fee remitted, remainder paid	2	—	—	1	2	3	1
*Amount paid to Doctors	£47	£57	£69	£58	£73	£121	£143
*Amount recovered from Patients	£20	£31	£48	£47	£38	£76	£105
*Cost to Council	£27	£26	£21	£11	£35	£45	£38

*These figures relate to financial year ending 31st March, the other figures in the table being for calendar year.

Registration of Nursing and Maternity Homes.—Under the Midwives and Maternity Homes Act, 1926, later embraced by the Nursing Homes Registration Act, 1927. 6 applications for registration by private persons were received, and after inspection of the premises and the Staff by the Medical Officer of Health it was recommended that the necessary certificates be granted. The applicants were all persons well known, of good reputation, and who had carried on their homes successfully for several years. No official application from unsuitable applicants was received, so that the question of an Order refusing registration did not arise. An application for exemption from registration was granted in the case of the General Hospital.

The M. & C.W. Voluntary Committee.—About 20 voluntary workers assist in the general routine of the clinics, distributing milk, organizing relief and giving advice to the mothers by holding Sewing Classes, Baby Days, and generally interesting themselves and the mothers in the future welfare of their homes and families.

LIST OF MIDWIVES PRACTISING IN THE COUNTY BOROUGH OF DARLINGTON.

No. on Roll.	Date of Enrolment.	Name.	Address.
796	28 January, 1904	Bartle, Harriet ...	8, Hammer St., Darlington.
20165	27 April, 1905 ...	Foster, Margaret ...	Gayles Cottage, Bright St.
43728	22 February, 1916	Gait, Sarah Ann ...	12, Thornton Street.
19855	27 April, 1905 ...	Geall, Florence Annie Adelaide	The Green, Cockerton.
67753	12 December, 1925	Goodfellow, Violet Jane	32 Leyburn Road.
42793	10 August 1915 ...	Hale, Alice ...	Queen's Nurses' Association Woodland Road.
55344	11 October 1921	Hancock, Ellen ...	29 Stanley Terrace.
71541	13 August, 1927 ...	Heathwaite, Edna ...	19, Greenbank Road North.
46105	11 August, 1917 ...	Hoskins, Sarah ...	12, Hammer St., Darlington.
58912	13 December, 1922	Jenkin, Jane ...	40, Willow Rd., Darlington.
48034	9 November, 1918	Jones, S. E. ...	Queen's Nurses' Association, Woodland Road.
60455	11 June, 1923 ...	Kirby, Ethel Mary ...	116 Neasham Road, Darlington.
20239	27 April, 1905 ...	Lunn, Tamar ...	21, Aldam St., Darlington.
64546	11 October, 1924	O'Donnell, Ann ...	Queen's Nurses' Association, Woodland Road.
73495	25 May, 1928 ...	Ogden, Alice ...	Queen's Nurses' Association, Woodlands Road.
46944	9 February, 1918...	Oliver, Eleanor Purvis	Queen's Nurses' Association, Woodland Road.
23651	28 June, 1906 ...	Pattison, Elvina ...	120, West Auckland Road.
64585	11 October, 1924	Redhead, Isabel ...	295 North Rd., Darlington.
63631	14 June, 1924 ...	Slater, Ellen ...	13, Hopetown Lane, Darlington.
65529	9 February, 1925	Smith, Annie ...	87, Gurney St., Darlington.
17902	23 March, 1905 ...	Trinham, Louisa ...	Superintendent, Queen's Nurses' Association Woodland Road.
65116	19 February, 1925	Watson, Ellen ...	22, Four Riggs, Darlington
60687	11 June, 1923 ...	Wrangham, Elizabeth Ann	Sister-in-Charge, Maternity Ward, General Hospital
72529	24 November, 1927	Younger, Ellen ...	Queen's Nurses' Association Woodlands Road.

REGISTER OF HOMES UNDER NURSING HOMES REGISTRATION ACT, 1927.

Miss Jane Jenkin, 40, Willow Rd., Darlington ... 2 beds available

Mrs. Isobel Lyle Yates, Argyll Nursing Home,
24 Cleveland Terrace ... 8 beds.

Mrs. Sarah Ann Gait, 12, Thornton Street ... 1 bed.

Miss Barbara Miller, Cleveland Nursing Home,
17 Cleveland Terrace... 6 beds.

Miss Mary Potter, Coniscliffe Nursing Home,
Coniscliffe Road ... 15 beds.

Miss Ethel Lazenby, Greencroft Nursing Home 2 beds.

SECTION X.

TUBERCULOSIS.

There were 85 deaths from Tuberculosis during 1928, as follows :—

	<i>Males</i>	<i>Females</i>	<i>Total</i>
Tuberculosis of the Respiratory System	39	19	58
Other Tuberculous Diseases....	19	8	27

Under the Tuberculosis Regulations 164 cases were notified, 85 of males and 79 of females ; 3 under 1 year of age ; 4 between 1 and 2 ; 4 between 2 and 3 ; 2 between 3 and 4 ; 2 between 4 and 5 ; 32 between 5 and 10 ; 18 between 10 and 15 ; 22 between 15 and 20 ; 43 between 20 and 35 ; 15 between 35 and 45 ; 18 between 45 and 65 ; and 1 over 65 years of age. Of these 26 came from Harrowgate Hill Ward ; 21 from North Road Ward ; 29 from Eastbourne Ward ; 24 from Cockerton Ward ; 11 from Pierremont Ward ; 23 from Central Ward ; 20 from West Ward ; and 10 from South Ward.

New Cases and Mortality during 1928.

Age-Periods				New Cases.				Deaths.			
				Pulmonary.		Non-Pulmonary.		Pulmonary.		Non-Pulmonary.	
				M.	F.	M.	F.	M.	F.	M.	F.
0—	...	...	...	...	...	3	...	...	...	1	1
1—	...	...	...	2	3	5	2	...	...	4	2
5—	...	...	...	3	6	10	13	...	1	7	1
10—	...	...	...	5	4	4	5	...	1	2	1
15—	...	...	...	8	8	1	5	6	5	...	2
20—	...	...	...	10	11	2	...	6	4	1	...
25—	...	...	...	11	7	1	1	9	4	1	...
35—	...	...	...	9	3	...	3	6	1	1	1
45—	...	...	...	2	4	3	...	8	1	1	...
55—	...	...	...	4	2	1	2	3	1	1	...
65 and upwards	...	...	...	1	...	...	...	1	1	...	...
Totals ...	...	...	...	55	48	30	31	39	19	19	8

Of the above 85 deaths, 12 were cases which came to the knowledge of the Medical Officer of Health otherwise than by notification under the Regulations.

PUBLIC HEALTH (Prevention of Tuberculosis) REGULATIONS, 1925, and PUBLIC HEALTH ACT, 1925 (Section 62).

There has been no action taken under the above.

TUBERCULOSIS SCHEME.

Dispensary.—The Dispensary at Feethams is open for the examination of notified tuberculous patients, suspected cases and their contacts—Tuesdays at 10 a.m. for men; Fridays at 10 a.m. for women and children.

As in previous years the work was carried out by the Durham County Council, who provide a Medical Officer and Nurse for attendance.

The Residential Institutions available for patients are provided also by the Durham County Council.

The number of new cases which have attended the Dispensary during the past eight years is given in the following table :—

1920	....	317	—	1924	....	207
1921	....	256	—	1925	....	266
1922	....	178	—	1926	....	207
1923	....	218	—	1927	....	155
				1928	....	131

The number of persons who attended the Dispensary during 1928 was 587, and the number of attendances made was 2,027. About 91 per cent. of these patients reside in the Borough.

During the year 147 first visits and 2,002 re-visits were paid to houses by the Tuberculosis Health Visitors.

Five shelters were erected for the use of patients residing in the Borough during the year and 7 shelters were actually in use by Borough patients on the 1st of January 1929.

There is co-operation between the Tuberculosis Medical Officer and the Staffs of the Health Office, the School Medical Service and the General Hospital. Quarterly reports are sent in by General Practitioners providing domiciliary treatment, and patients receiving such treatment usually attend at the Dispensary once a quarter. Where the diagnosis is doubtful the patients are kept under observation by the Dispensary Staff. Home contacts are supervised and examined systematically by the Tuberculosis Medical Officer either at the Dispensary or at their homes. The Tuberculosis Health Visitors visit and give advice in the homes of every case notified.

Advanced cases or those with discharging wounds are nursed and dressed in their homes by Queen's Nurses. Tenpence per visit is paid for this service. 1,176 visits were paid to 29 patients.

The majority of the non-pulmonary cases of Tuberculosis are treated in the Darlington General Hospital, where there are facilities for X-ray examination, surgical operative assistance and the provision of surgical apparatus.

The incidence is given in the following tables :—

NOTIFICATIONS OF TUBERCULOSIS (Pulmonary and Non-Pulmonary) and DEATHS.

Year	Pulmonary		Non-Pulmonary	
	<i>Notified</i>	<i>Deaths</i>	<i>Notified</i>	<i>Deaths</i>
1920	151	61	55	22
1921	124	66	32	17
1922	111	71	47	20
1923	135	69	80	15
1924	119	62	65	21
1925	134	58	56	24
1926	111	59	76	16
1927	119	68	59	19
1928	103	58	61	27

PULMONARY CASES IN INSTITUTIONS.

	Insured		Not Insured		Total	
	Males	Females	Males	Females	Males	Females
Under treatment at the beginning of the year	9	5	5	2	14	7
Admitted	18	6	10	8	28	14
Discharged	19	7	7	5	26	12
Under treatment at the end of the year	8	4	8	5	16	9
Number of days treatment	3234	1707	2157	1568	5391	3275

NON-PULMONARY CASES IN INSTITUTIONS.

Under treatment at the beginning of the year	0	0	3	0	3	0
Admitted	5	1	5	9	10	10
Discharged	3	0	6	5	9	5
Under treatment at the end of the year	2	1	2	4	4	5
Number of days treatment	254	86	1374	1295	1628	1381

VOLUNTARY CARE COMMITTEE.

The excellent work of this Committee has been carried out in previous years under the Honorary Secretaryship of the Medical Officer of Health. The Annual Report dealing with its work shews the manifold directions of its aims and achievements. Through the Care Committee, facilities are granted and arrangements made for the provision of nourishment, financial assistance, assistance in dental treatment, provision of footgear and clothing

for domestic use and Sanatorium, assisting and advising patients in obtaining better housing and suitable employment, giving friendly encouragement and advice to patients as to the mode of life, in fact the general supervision of the welfare of patients.

During the year ending 31st of March, 1929, 48 new applications were received and help was provided in 38 of these. Fifty-nine cases helped in previous years continued to benefit. The total number of cases dealt with since the beginning of the work of the Care Committee in 1919 up to 31st March, 1929, is 417.

The Care Committee have, during the year, rendered real assistance to deserving cases, and their work has been much appreciated by those who have been helped. The Tuberculosis Care Committee, far from being just purely a charitable organisation to help stricken families, is a necessary link in the work being undertaken by Local Health Authorities, not merely by ameliorating the sufferings of the patients and their families, by assisting them materially and otherwise when and where necessary but in reaching the ultimate aim of such Authorities **in seeking to eliminate this dreadful scourge from the community, or at any rate making its prevalence a negligible quantity.**

Personally I am of the opinion that the work of our Maternity and Child Welfare and School Medical staff is of very much more value in checking early tuberculosis than our direct tuberculosis schemes.

SECTION XI.

VENEREAL DISEASES.

In 1920 a scheme was drawn up making certain improvement as required by the Ministry of Health for the treatment of Venereal Diseases, in connexion with the Skin Department at the General Hospital, Darlington. The work is now carried out by a part time Medical Officer, a full-time Male Orderly, and a member of the Nursing Staff of the Hospital. Clinics are more frequent and intermediate treatment can be given.

During the past six years much progress has been made in the thoroughness of the treatment and in the facilities presented to the patients, though there is still much need of additional accommodation which cannot be provided in the present buildings.

Patients requiring intern Hospital treatment are admitted on the recommendation of the Medical Officer, two beds being provided.

The appointment of the Medical Officer as part-time Schools Medical Officer has been the means of detecting infected families, leading to the more complete eradication of the diseases and consequent protection of further offspring.

The Department is open for the following sessions :—

Males.—Tuesdays 10-0 a.m., 5-30 p.m.

Fridays 5-30 p.m. and by appointment with the Medical Officer.

Women and Children.—Mondays 2 p.m.

Women Only.—Tuesdays 2 p.m. Fridays 2 p.m.

For Irrigation.

Males.—Daily from 10 a.m. (full-time Orderly in attendance).

Women.—Daily from 2 p.m. and by appointment with the Medical Officer.

Attendances of men, women and children are rapidly increasing, not only those from Darlington, but also those from the districts for 20 miles around. This does not mean that there is necessarily an increase in the incidence of venereal diseases, but rather that the diagnosis is now more readily made and that practitioners are realizing the assistance presented in a neighbouring clinic with a specialist officer at hand. A few Darlington residents have attended the neighbouring clinics at Stockton, Durham, Newcastle, etc.

Opportunities of instruction are given to medical practitioners at the Clinic, and those who are qualified receive free supplies of arsenobenzol compounds on application. During the year nine doses of these were supplied.

No action has been taken under the Venereal Diseases Act of 1917.

There is a local branch of the British Social Hygiene Council, of which the Medical Officer of Health is the Honorary Secretary.

Laboratory work is carried out at the Clinic by the Medical Officer and at the College of Medicine, Newcastle-upon-Tyne.

Bacteriological Examinations for Darlington patients made at the Durham College of Medicine, Newcastle-upon-Tyne, during the year are set out as follows :—

			For detection of spirochetes	For detection of gonococci	For Wassermann reaction	C.S. Fluid for General Examination	C. S. Fluid for the Wassermann reaction
For Treatment Centre...	...		1	14	147	...	...
For Practitioners	...	...	...	1	86	...	1
Totals ...	...	...	1	15	233	...	1

Services at the Venereal Diseases Treatment Centre at the Darlington General Hospital, 1928.

Classified according to the areas in which the patients resided

					Darling- ton	Durham	North Riding of Yorks.	Total
Number of cases from each area dealt with during the year for the first time and found to be suffering from :—								
Syphilis ...	...	...	...	40	...	14	...	66
Soft Chancre ...	...	...	...	3	...	1	...	4
Gonorrhœa ...	...	...	...	128	...	32	...	175
Conditions other than Venereal	...	...	...	64	...	27	...	92
Total	...	...	...	235	...	74	...	337
Total number of attendances of all patients residing in each area								
	...	...	...	11,388	...	2,476	...	14,660
Aggregate number of "In-patient days" of all patients residing in each area								
	...	...	...	97	...	—	...	129
Number of doses of arsenobenzol compounds given to patients residing in each area :—								
1.—Out-patient Clinic	...	...	...	234	...	89	...	408
2.—In-patient Dept.	...	...	...	4	...	—	...	5

Number of Darlington County Borough Out-patients attending Clinic for first time.

	Syphilis		Gonorrhœa		Soft Chancre		Other Cases		Total		Grand Total
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	
1920	65	42	55	14	2	—	8	5	140	61	201
1921	47	22	24	5	—	—	9	—	80	32	112
1922	36	22	17	12	3	1	13	12	69	47	116
1923	16	22	36	19	—	5	18	12	70	58	128
1924	25	13	49	36	3	1	24	40	101	90	191
1925	32	26	54	30	3	2	24	26	113	84	197
1926	31	27	70	25	1	1	52	29	154	82	236
1927	24	30	78	39	1	—	26	15	129	84	213
1928	33	33	118	57	4	—	44	48	199	138	337

Total Attendances of all Patients from Darlington Borough.

Year	Males	Females
1920	1,239	556
1921	881	353
1922	1,249	567
1923	2,977	1,311
1924	3,564	869
1925	3,448	759
1926	5,651	1,304
1927	6,449	1,407
1928	9,074	2,314

I am indebted to Dr. Ferguson for the following comment.

The volume of work at the Clinic, General Hospital, Darlington, has continued to expand during the past year. The number of new patients seeking treatment at the clinic reached the record number of 334; of these 241 were found on examination to be suffering from Venereal Disease. Consultations with the Medical Officer and Intermediate treatments both showed increases of about 50%. The actual figures are set out below:—

		1927		1928	
		Total all areas.	Darlington	Total all areas.	Darlington
Total attendances	....	9,676	7,856	14,665	11,388
Consultations	....	5,437		8,059	
Intermediate treatment	....	4,242		6,606	
Total new patients	....	320	213	334	235
New patients found to be suffering from Venereal Disease		258	172	241	171

I append a table showing the sex distribution and nature of the disease of the 171 Darlington patients attending at the clinic for the first time during the year and found to be suffering from Venereal Disease.

			Number of Patients	Average Age Years	Gonorrhœa	Suffering from Syphilis	Soft Sore
Males	....	....	95	29·7	76	16	3
Females	....	....	65	24·4	51	13	1
Children	....	....	11	5·0	2	9	0

As in previous years it has to be recorded that many patients, particularly females, do not seek treatment till the disease is long established, and in some cases, irreparable harm done. The stage of disease at first visit of venereal patients reporting during the year may be tabulated thus :—

State of Disease at first visit.

		Gonorrhœa.		Syphilis.		
Un-complicated	Complicated	Over 4 weeks duration		Primary.	Secondary	Tertiary
Males	72	6	9	5	1	11
Females	31	20	14	0	3	11
	103	26	23	5	4	22

The cases of Venereal Disease were referred from the following sources :—

	Male.	Female	Total
Practitioners in the Town, and V.D. Officer	40	23	63
General Hospital	5	20	25
Other V.D. Clinics	8	1	9
St. Agnes' Home	0	9	9
Child Welfare Officer	1	2	3
School Clinic....	0	2	2
Came spontaneously	49	11	60
	103	68	171

Of the 64 cases found on examination not to be suffering from Venereal Disease, 34 were referred by Practitioners for diagnosis, 13 had been exposed to the risk of infection and came to

he clinic without having seen another Doctor, 16 were suffering from non-specific skin lesions, and one was sent by the Matron of St. Agnes' Home.

There is evidence of increased realisation of the dangers of venereal disease among the Community, and an increased willingness to come for treatment. It has been noticeable that after each burst of health propaganda in the town, there has been a small spurt of new patients to the clinic, chiefly males who have been exposed to infection, often years previously. The main point requiring further stress is the urgent need for the institution of treatment in all cases at the earliest possible moment.

SECTION XII.

MENTAL DEFICIENCY.

This work, which is administered and carried out by the Medical Officer of Health and the Deputy Medical Officer of Health, who are the certifying officers under the Mental Deficiency Act, comes under the Committee for Promoting the Welfare of Afflicted Persons. The Health Visitors assist in the supervision and reporting of home conditions.

Two types of cases are dealt with :—

(a) **Statutory Cases**, consisting of mental defectives under and over 16 years, known to require special care and supervision; educable mentally defective children between the ages of 7 and 16 years; and children referred to the Local Authority under the Mental Deficiency Act, as being either incapable of further education in a special school or of being incapable of such education without detriment to other children. All these cases are dealt with under the Mental Deficiency Act, being placed in Institutions, or under guardianship or supervision.

(b) **Education Cases**, consisting of mentally defective children between the ages of 7 and 16 years capable of education in the special school provided. These are dealt with by the Education Committee.

The Medical Officer of Health is also Schools Medical Officer, that there is liaison in the work.

Number of Mentally Defective.—Ascertainment of adult cases is not by any means complete, as several cases only come to the notice of the Medical Officer of Health through such channels as the Health Visitors in their routine home visits in connection with Maternity and Child Welfare, and the Police Courts.

The total number of mentally defective persons in the Borough known by medical examination is :—

	<i>Males</i>		<i>Females</i>	
(a) Statutory and Observation Cases, all ages	64	....	45	
(b) Education Cases, 7-16 yrs.	47	....	40	
	<hr/>		<hr/>	
Total	111		85	—196

Distribution.

The 108 cases are distributed as follows :—

(a) Statutory Cases, &c.				
In Certified Institutions	8	....	6	
In Feethams Poor Law Institution	0	....	4	
Under supervision at home				
Statutory	15	....	15	
Voluntary	41	....	20	
	<hr/>		<hr/>	
	64		45	—109
(b) Education Cases.				
Attending Certified Schools	35	....	34	
Attending Elementary Schools	6	....	3	
At other Institutions	2	....	0	
Resident at home....	0	....	0	
	<hr/>		<hr/>	
	43	....	37	—80
(c) Transferred from care of Education Committee to Local Control Authority during 1928				
	4	....	3	—7
	<hr/>		<hr/>	
Total	111		85	—196

There were removed from the register during the year cases either through death or removal from the district. In the latter event, the Medical Officer of Health of the District was communicated with, in order to ensure continued supervision

The placing of these unfortunate cases in suitable institutions presents a great difficulty, firstly in discriminating which defectives could be removed, as the available institutional vacancies are very few; and secondly because the financial burdens are heavy. The Board of Control are therefore urging Local Authorities to press forward their arrangements for care other than institutional. Such arrangements include increased home supervision, appointment of guardians, and the establishment of occupation centres.

At present under the Education Committee Scheme the Special School for mentally defective children, of which Miss Egg is in charge, is doing excellent work, but unfortunately most of the children on their discharge at 16 years of age find themselves obliged to join the ranks of the unemployed. They cannot hold their own in the labour market, and in their endeavour to be busy they find the wrong thing.

The subjects of instruction at such centres are very elementary, inculcating ideas of cleanliness, neatness, discipline, muscle control and everyday things of life. For low grade children, drill, sense training, singing, polishing and easy household work, such as setting a table, sweeping up crumbs, provide opportunities for amusement, companionship and occupation in a way which is impossible in the homes from which these cases usually come. The higher grade defectives receive instruction in plain sewing, stitching, raffia mats, basket work, and rug making.

The establishment of such a centre in Darlington took place this year, and Miss Holmes a well experienced worker appointed Secretary of the local Mental Welfare Association and Supervisor of the Occupation Centre, has already assisted materially in improving our ascertainment and control.

SECTION XIII.

SANITARY CIRCUMSTANCES OF THE AREA.

Particulars of Sanitary administration are also given in the report of the Chief Sanitary Inspector printed herewith.

Water Supply.—The water supply of the Borough is obtained from the River Tees. The intake is situated near the western boundary of the Borough and the water is pumped in two stages from the River into large subsiding tanks, (b) from the subsiding tanks through the filters to the Reservoirs and town.

Pumping plant of ample capacity has been installed and alternative sources of power are available, viz., steam, suction gas and electricity, to provide for all reasonable requirements.

The mechanical filtration plant installed in 1924-7 has now been in operation since June, 1927. This plant, which has superseded entirely the old system of slow sand filters, is working satisfactorily. The initial difficulties met with on the starting up of the plant have been overcome.

The peaty discolouration which is present in the River Tees water, especially in the autumn and after heavy rains, is removed by the addition of Alumina Ferric, the quantity added varying from 1 grain to 6 grains per gallon.

Lime water is also added after filtration in order to correct any tendency towards plumbo-solvency.

Chlorine is injected under pressure into the filtered water main as it leaves the Waterworks. The amount of chlorine added varies from $\frac{1}{3}$ to $\frac{1}{2}$ part per million, according to bacteriological findings. Two million gallons per day are used by the 16,000 houses in the Borough and the 400 outside.

Analyses of the river, filtered and chlorinated water are made weekly by the Borough Analyst, whose reports during the past year have been consistently satisfactory.

Typical analyses are as follows :—

River Water.

Number of colonies on Nutrient Gelatin at 18°-20° C. after 72 hours.	600 per c.c.
Presumptive B. Coli Test after 72 hours	Positive in 0.1 c.c.

Filtered Water.

Number of colonies on Nutrient Gelatin at 18°-20° C. after 72 hours.	120 per c.c.
Presumptive B. Coli Test after 72 hours	Positive in 0.1 c.c.

Chlorinated Filtered Water.

Number of colonies on Nutrient Gelatin at 18°-20° C. after 72 hours	3 per 2 c.c.
Presumptive B Coli Test after 72 hours	Negative in 100 c.c.

Rivers and Streams.—The River Skerne which flows through the town and was once regarded as an open sewer, is now provided with well built banks along most of its course. At times during very wet seasons, storm water may overflow into low lying waste

land, in the vicinity of Valley Street, at present used as a tip, and by its retention there, with decomposing vegetable matter, there is risk of a serious nuisance. Attention to the weir on the river and the draining of the low lying land would improve the present eye sore immensely, for profitable development.

There was no necessity to take any action to check the pollution of rivers or streams in the area.

Complaints have been made of nuisances arising from the practice of allotment holders and others throwing their vegetable refuse into ditches and streams to decompose. These have been dealt with by the sanitary inspectors and the allotment committees involved.

Smoke Abatement.—As so much of the nuisance from this cause arises from domestic fires, one of the first steps towards a cleaner town is the production of cheap gas and electricity for the home. This has been the policy in Darlington for many years. At present, a determined effort is being made to urge those people who must use open fires to burn smokeless fuel, either the locally produced coke or the proprietary fuels, *e.g.*, Coalite, Riecoal or Kincole, now on the market. Many of the large works in the town have been under observation and are considering the use of modern furnaces which consume their own smoke, to the distinct advantage of the amenities and health of the neighbourhood.

Premises which can be controlled by Bye laws or Regulations.

In spite of the totally inadequate inspectorate staff an attempt has been made during the year to ascertain the conditions under which certain people are living in the Borough in tents, vans, sheds, houses let in lodgings, and insanitary dwellings. Great difficulty has been experienced in dealing with the cases as there is no available satisfactory accommodation at a rental within the capacity of these unfortunate folk. Particulars are given in the Sanitary Inspector's Report appended.

Schools.—The sanitary condition and water supply of schools are discussed in the appropriate report included herewith.

Drainage, Sewerage and Closet Accommodation.—The town is sewered on the partially combined system, and storm overflows are provided discharging at convenient points, chiefly in the neighbourhood of the River Skerne. The sewage is conveyed to the Sewage Farm situated on the west bank of the Skerne, about a mile to the south of the town. Treatment of the sewage is carried out by broad irrigation. An experimental activated sludge plant is shortly to be installed.

As there are still approximately 6,000 privy ashpits in use in the town, the question of additional means of sewage disposal is being considered, a scheme for a complete conversion to a water carriage system being now in hand. It is estimated that the whole work will be completed in five years from now.

Scavenging.—The scavenging of the town has been very satisfactorily carried out. The refuse is disposed of principally by depositing on tips which are covered with soil or clean ashes. A small proportion of privy refuse is conveyed to farms for use on the land. The conversion of the privy ashpits will wipe away this problem to a great extent. In the work of conversions, special tipping bins are being installed so that collection of refuse will be more rapid and efficient.

Cemeteries.—Three large Cemeteries with recent extensions provide adequate room for disposal by earth burial for many years to come.

Crematorium.—Public opinion is now awaking to this sanitary method of disposal of our dead. The Darlington Crematorium situated in the West Cemetery was used during the year for the record number of 40 cremations. The Medical Officer of Health holds the appointment of Honorary Medical Referee for the authorizing of each cremation by the Darlington Cremation Society.

SECTION XIV.

LEGISLATION INTRODUCED DURING 1928.

Many new Orders and Regulations were issued by the Minister of Health during the year, affecting the Health Department, and it has proved quite a task keeping the practical work up to date with the legislation.

Nursing Homes Registration Act, 1927

Infectious Diseases Regulations, 1927.

Public Health (Notification of Puerperal Fever and Puerperal Pyrexia) Amendment Regulations, 1928.

Public Health (Ophthalmia Neonatorum) Amendment Regulations, 1928.

Mental Deficiency Act, 1927.

Fertilizers and Feeding Stuffs Act, 1926.

Agricultural Produce (Grading and Marking) Act, 1928.
 Rag and Floek Act, (1911) Amendment Act, 1928.
 Shop (Hours of Closing) Act, 1928.
 The Food and Drugs (Adulteration) Act, 1928.
 The Public Health (Dried Milk) Amendment Regulations,
 1927.
 The Public Health (Condensed Milk) Amendment
 Regulations, 1927.
 The Public Health (Preservatives, etc., in Food) Regu-
 lations, 1927.

Adoptive Acts, etc.—The following Acts have been adopted in the Borough :—

Baths and Wash-houses Acts of 1846 and 1847.
 Infectious Disease (Notifcation) Act, 1889.
 Infectious Disease (Prevention) Act, 1890.
 Public Health Acts Amendment Act, 1890.
 Public Health Acts Amendment Act, 1907 (except
 Sections 48, 82, 83, 92 and 94).
 Public Health Act, 1925, Sections 13-23 ; 25-30 ; 32 ;
 33 ; 35-39 ; 41-55 ; all inclusive.
 Darlington (Water Supply) Order 1928.

The most important local Act dealing with Public Health matters is the Darlington Extension and Improvement Act, 1872. This Act conferred on the Darlington Council powers with regard to closing property unfit for human habitation of the same character as those contained in the most recent Acts.

Section 92 of the Darlington Extension and Improvement Act, 1872, requires that all private slaughter-houses in the Borough should be licensed.

On May 30th, 1911, an Order was obtained from the Local Government Board, under Section 50 of the Public Health Acts Amendment Act, 1907, declaring the trades of fat melter or fat extractor, fish fryer, gut seraper, rag and bone dealer, and candle maker within the Borough to be offensive trades.

Under the City of Leeds, etc. (Measles and German Measles) Regulations, 1920, Measles and German Measles are notifiable in Darlington.

Chiekenpox was made notifiable in the Borough on 23rd December, 1923.

Under the Borough of Darlington (Whooping Cough) Regulations, 1926, first cases of Whooping Cough occurring in children under five years of age, are notifiable in Darlington.

SECTION XV.

HOUSING.

From the Census Statistics it is estimated that 5.8 per cent of our families are sharing a house compared with 10.0 per cent for the neighbouring County Boroughs in Durham. In our poorest quarters several families are living under terrible conditions of overcrowding.

By reason of the economic conditions even the weekly rent of 7/6 now being charged for the new Corporation kitchen houses is a barrier to many hoping to improve their environment. The effect of all this is that the worst class of housing, chiefly in the Park Street area, is the most crowded. Potential movers are deterred by the steepness in the ladder of rents from transferring from one class of property to another. Our worst areas therefore are crowded with people who are in addition to the habitual slum dwellers, because of the stoppage of the normal movement from poor to better houses.

During the last ten years a total of 2,705 houses have been built in the town.

This figure would compare very favourably with that of any other town of Darlington's size.

Since the passing of the Housing Act of 1923, Darlington has applied for and been allotted 1,800 subsidy certificates.

Of the 1,800 already allotted, 1,755 have already been issued or promised, and 1,447 subsidy houses have been completed.

The following figures show the progress made in house building since 1918 :—

1918 :		Private Enterprise.		By Corporation.			Total.
		Without Subsidy.	With Subsidy.				
1918	....	2	—	....	—	....	2
1919	....	6	—	....	—	....	6
1920	....	17	—	....	—	....	17
1921	....	9	—	....	86	....	95
1922	....	187	—	....	152	....	339
1923	....	264	1	....	35	....	300
1924	....	103	208	....	18	....	329
1925	....	196	299	....	15	....	510
1926	....	81	256	....	56	....	387
1927	....	56	334	....	—	....	390
1928	....	58	274	....	—	....	332
Total		979	1372	356			2707
Huts	....	....	....	10			
Council Houses	outside Borough	....	....	35			

It will be noted that since 1921 the Corporation have built 91 houses, and also let ten huts, which are situated off Haughton Road.

Housing Statistics for the year 1928.

Number of new houses erected during the year :—

(a) Total (including numbers given separately under (b) and (c)	332
(b) With State assistance under the Housing Acts—	
(i) By the Local Authority	0
(ii) By other bodies or persons	274
(c) By private enterprise	58

—Unfit Dwelling-houses—

Inspection—

(1) Total number of dwelling-houses inspected for housing defects (under Public Health or Housing Acts)	1042
(2) Number of dwelling-houses which were inspected and recorded under the Housing (Inspection of District) Regulations, 1910, or the Housing Consolidation Regulations, 1925	193
(3) Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation	190
(4) Number of dwelling-houses (exclusive of those referred to under the preceding sub-head) found not to be in all respects reasonably fit for human habitation	499

1.—Remedy of defects without service of Formal Notices : Number of defective dwelling-houses rendered fit in consequence of informal action taken by the Local Authority or their officers	497
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2.—Action under Statutory Powers :—

(a) Proceedings under Section 3 of the Housing Act, 1925	
(1) Number of dwelling-houses in respect of which notices were served requiring repairs	—
(2) Number of dwelling-houses which were rendered fit after service of formal notices :—	
(a) By Owners	
(b) By Local Authority in default of owners	

- (3) Number of dwelling-houses in respect of which Closing Orders became operative in pursuance of declarations by owners of intention to close 45

(b) Proceedings under Public Health Acts—

- (1) Number of dwelling-houses in respect of which notices were served requiring defects to be remedied 22

- (2) Number of dwelling-houses in which defects were remedied after service of formal notices :—

(a) By Owners 22

(b) By Local Authority in default of owners

(c) Proceedings under Sections 11, 14 and 15 of the Housing Acts, 1925 :—

- (1) Number of representations made with a view to the making of Closing Orders
- (2) Number of dwelling-houses in respect of which Closing Orders were made
- (3) Number of dwelling-houses in respect of which Closing Orders were determined, the dwelling-houses having been rendered fit
- (4) Number of dwelling-houses in respect of which Demolition Orders were made
- (5) Number of dwelling-houses demolished in pursuance of Demolition Orders

SECTION XVI.—STATISTICAL TABLES.

BIRTH-RATE, DEATH-RATE and ANALYSIS of MORTALITY during the Year 1928.

(Provisional figures. The rates have been calculated on a population estimated to the middle of 1928, but those for the towns have been calculated on populations estimated to the middle of 1927. The Mortality rates refer to the whole population as regards England and Wales, but only to civilians as regards London and the groups of towns).

	RATE per 1000		ANNUAL DEATH-RATE PER 1,000 POPULATION.										RATE PER 1,000 BIRTHS		PERCENTAGE OF TOTAL DEATHS			
	Still Births	Live Births	All Causes	Enteric Fever	Smallpox	Measles	Scarlet Fever	Whooping Cough	Diphtheria	Influenza	Violence	Diarrhoea and Enteritis (under 2 years)	Total Deaths under One Year	Certified by Registered Medical Practitioners	Inquest Cases	Certified by Coroner after P.M.	No Inquest	Uncertified Causes of Death
England and Wales	16.7	0.70	11.7	0.01	0.00	0.11	0.01	0.07	0.06	0.19	0.53	7.0	65	90.9	6.7	1.4	1.0	1.0
107 County Boroughs & Great Towns including London	16.9	0.70	11.6	0.01	0.00	0.15	0.02	0.09	0.09	0.17	0.48	9.6	70	91.0	6.5	1.9	0.6	0.6
156 Smaller Towns (1921 Adjusted Populations 20,000—50,000) ..	16.6	0.73	10.6	0.01	0.00	0.08	0.01	0.06	0.08	0.21	0.41	4.8	60	92.6	5.7	0.5	1.2	1.2
London	15.9	0.53	11.6	0.01	0.00	0.30	0.02	0.09	0.09	0.13	0.55	10.2	67	88.7	7.6	3.7	0.0	0.0
Durham County	21.0	0.89	11.4	0.01	0.00	0.08	0.01	0.14	0.09	0.24	0.47*	7.8	80	96.8	—	—	3.2	3.2
DARLINGTON	15.9	0.77	10.4	0.01	0.01	0.03	0.01	0.01	0.15	0.30	0.25*	2.6	59	90.6	5.1	—	4.3	4.3

* Excluding Suicide.

CAUSES OF DEATH AT DIFFERENT PERIODS OF LIFE IN DARLINGTON, 1928. (Figures supplied by the Registrar General).

58

CAUSES OF DEATH		Sex	All Ages	0—	1—	2—	5—	15—	25—	45—	65—	75—	Deaths of Residents and Non-Residents in Darlington Institutions	Deaths of Residents in other Institutions
All causes	... ..	M. F.	404 342	46 21	5 9	10 6	23 13	20 24	51 38	109 86	77 70	63 75		
Uncertified	... ..	M. F.	19 13	5 2	... ...	... ...	2 ...	... ...	1 1	7 5	1 2	3 3		
1. Enteric Fever	... ..	M. F.	1 ...	... ...	... ...	... ...	... ...	... ...	1...	...	...	...	...	...
2. Small-pox	... ..	M. F.	... ...	... ...	... ...	... ...	... ...	... ...	... ...	...	...	...	...	...
3. Measles	... ..	M. F.	1 2	1 ...	... ...	1 ...	1...	......	......	...	...	...	...	...
4. Scarlet Fever	... ..	M. F.	... 1	... ...	... ...	... ...	1...	......	......	...	...	...	...	...
5. Whooping Cough	... ..	M. F.	... 1	......	......	......	......	......	......	...	...	...	...	...
6. Diphtheria	... ..	M. F.	... 5	... 6	1 ...	2 ...	2 3	1...	......	...	...	...	...	...
7. Influenza	... ..	M. F.	... 15	1 6	2 ...	1 ...	1 ...	... ...	1 ...	4 2	7 2	1 1	...	...
8. Encephalitis Lethargica	... ..	M. F.	... 1	... ...	... ...	... ...	... ...	... ...	... ...	...	1	...	...	...
9. Meningococcal Meningitis	... ..	M. F.	... ...	... ...	... ...	... ...	... ...	... ...	... ...	...	...	...	...	...
10. Tuberculosis of Respiratory System	... ..	M. F.	... 43	... 20	... ...	... ...	1 2	13 9	15 6	13 2	1 1	...	...	...
11. Other Tuberculous Diseases	... ..	M. F.	... 17	1 8	1 2	3 1	8 2	... ...	2 6	2 20	...	...	...	...
12. Cancer, Malignant Disease	... ..	M. F.	... 31	... 46	... ...	1 2	... ...	... ...	... ...	...	12 11	3 7	...	...
13. Rheumatic Fever	... ..	M. F.	... 3	... ...	... ...	2 ...	1...	......	......	...	...	...	...	...
14. Diabetes	... ..	M. F.	... 2	... 2	......	......	......	......	......	...	...	...	...	...
15. Cerebral Haemorrhage, etc.	... ..	M. F.	... 24	... ...	... ...	... ...	1 ...	... ...	1 ...	7 ...	1 5	10 6	...	...

CAUSES OF DEATH		Sex	All Ages	0—	1—	2—	5—	15—	25—	45—	65—	75—	Deaths of Non-Residents in Darlington Institutions	Deaths of Residents in other Institutions
17	Arterio-sclerosis ...	M.	32	...	...	...	...	...	...	2	16	14	9	1
18.	Bronchitis ...	F.	13	...	...	...	...	...	...	2	7	4	6	...
	...	M.	12	...	...	...	1	...	...	1	6	1	4	...
19.	Pneumonia (all forms) ...	F.	20	...	...	...	...	...	1	2	5	8	3	...
	...	M.	37	3	3	1	1	1	11	10	4	3	12	2
20.	Other Respiratory Diseases ...	F.	15	1	2	...	...	1	4	2	3	2	7	...
	...	M.	8	...	...	...	...	...	1	4	...	3	...	...
21.	Ulcer of Stomach or Duodenum ...	F.	4	...	...	...	...	1	...	2	1	...	1	...
	...	M.	3	...	...	...	...	...	...	2	1	...	3	...
22.	Diarrhoea, etc. ...	F.	...	...	...	...	...	...	...	...	...	...	...	...
	...	M.	2	1	...	...	...	...	...	...	...	...	...	...
23.	Appendicitis and Typhlitis ...	F.	2	1	...	...	1	...	...	...	1	...	...	...
	...	M.	2	...	...	...	...	...	...	1	...	...	2	...
24.	Cirrhosis of Liver ...	F.	2	...	...	...	...	1	1	...	...	...	4	...
	...	M.	...	...	...	...	...	...	...	...	...	...	...	...
25.	Acute and Chronic Nephritis ...	F.	...	...	...	...	1	...	...	6	3	...	...	...
	...	M.	11	...	...	...	...	...	1	...	...	...	...	...
26.	Puerperal Sepsis ...	F.	16	...	...	...	...	1	5	3	6	1	3	1
	...	M.	...	...	...	...	...	...	...	...	...	...	...	...
27.	Other Accidents and Diseases of Pregnancy and Parturition ...	F.	3	...	...	...	...	...	3	...	...	...	...	...
	...	M.	...	...	...	...	...	...	...	...	...	...	...	...
28.	Congenital Debility and Malformation, Premature Birth ...	F.	4	...	...	...	...	1	3	...	...	...	8	...
	...	M.	23	23	...	...	...	...	...	...	...	...	6	1
29.	Suicide ...	F.	12	11	...	...	...	1	...	...	...	...	2	...
	...	M.	5	...	...	...	...	...	1	1	1	2	2	...
30.	Other Deaths from Violence and Accidents ...	F.	3	...	...	...	...	1	...	1	1	...	...	...
	...	M.	10	...	...	...	1	1	4	2	2	...	15	...
31	Other defined diseases ...	F.	8	...	2	1	...	...	1	2	...	3	11	...
	...	M.	70	13	1	1	4	2	6	16	8	20	33	...
32.	Causes ill-defined or unknown...	F.	66	4	1	1	3	3	5	15	10	24	24	...
	...	M.	2	...	...	...	...	...	...	2	...	...	2	...
	...	F.	3	...	...	...	...	...	1	2	...	...	2	...

INFANT MORTALITY.

1928. NET DEATHS FROM STATED CAUSES AT VARIOUS
AGES UNDER ONE YEAR OF AGE.

CAUSES OF DEATH				Under 1 Week	1-2 Weeks	2-3 Weeks	3-4 Weeks	Total under 4 weeks	4 Weeks—3 Months	3-6 Months	6-9 Months	9-12 Months	Total Deaths
All causes	Certified	...	...	31	5	3	1	40	6	6	6	2	6
	Uncertified	...	...	5	...	...	...	5	1	...	1	...	...
{	Smallpox	...	...	...	...	...	...	...	...	...	...	...	...
	Chickenpox	...	...	...	...	...	...	...	...	...	...	...	...
{	Measles	...	...	...	...	...	...	...	...	...	...	...	...
	Scarlet Fever	...	...	...	...	...	...	...	...	...	...	...	...
{	Whooping Cough	...	...	...	...	...	...	...	...	...	...	...	...
	Diphtheria and Croup	...	...	...	...	...	...	...	...	...	...	...	...
{	Erysipelas	...	...	...	...	...	...	...	...	...	...	...	...
	Influenza	...	...	...	...	...	...	...	1	...	...	...	...
{	Tuberculous Meningitis	...	...	...	...	...	...	...	...	...	2	...	...
	Abdominal Tuberculosis	...	...	...	...	...	...	...	...	...	...	...	...
{	Other Tuberculous Diseases	...	...	...	...	...	...	...	...	...	...	...	...
	Meningitis (<i>not Tuberculous</i>)	...	...	...	...	...	...	...	...	...	...	...	...
{	Convulsions	...	...	1	...	...	...	1	1	...	1	...	...
	Laryngitis	...	...	...	...	...	...	...	...	...	...	...	...
{	Bronchitis	...	...	...	...	1	...	1	1	1	1	1	...
	Pneumonia (all forms)	...	...	...	...	...	...	...	...	1	...	1	...
{	Diarrhoea	...	...	...	...	...	...	...	...	...	1	...	...
	Enteritis	...	...	...	...	...	...	...	...	...	...	...	...
{	Gastritis	...	...	...	...	...	...	...	...	...	...	...	...
	Gastro-enteritis	...	...	...	...	...	...	...	...	1	...	...	...
{	Syphilis	...	...	...	3	...	...	3	2	1	...	...	...
	Rickets	...	...	...	...	...	...	...	...	...	...	...	...
{	Suffocation, overlying	...	...	...	...	...	...	...	...	...	...	...	...
	Injury at birth	...	...	2	...	...	...	2	...	...	...	...	...
{	Atelectasis	...	...	...	...	...	...	...	...	...	...	...	...
	Congenital Malformations	...	...	1	...	...	...	1	...	...	...	...	...
{	Premature Birth	...	...	20	...	1	...	21	...	...	1	...	...
	Atrophy, Debility and Marasmus	...	...	6	2	...	1	9	2	2	...	...	...
{	Other causes	...	...	6	...	1	...	7	1	...	...	...	...
	Totals	...	...	36	5	3	1	45	8	6	6	2	...

Net Births in the year—Legitimate, 1,073 ; illegitimate, 67.

Net Deaths in the year—Legitimate infants, 62 : males, 43 ; females, 19.

Illegitimate infants, 5 : males, 3 ; females, 2.

CANCER DEATHS—PARTS OF BODY AFFECTED.

PARTS AFFECTED	Under 35		35-45		45-55		55-65		65-75		75 & over		Total	
	M	F	M	F	M	F	M	F	M	F	M	F	M	F
Peritoneum, Intes- tines and Rectum	1	2	1	1	2	...	2	...	...	2	6	5
Stomach and Liver	...	1	...	1	...	4	5	3	3	8	2	2	10	19
Reproductive Organs	...	1	...	1	...	4	...	1	...	2	...	2	...	11
Breast	1	...	2	...	2	...	...	...	1	...	6
Other Glands	1	...	2	...	...	...	3	...
Mouth and Throat	2	2	1	...	3	...	...	...	6	2
Bones	1	...	1	...
Other Parts	...	1	...	...	2	...	1	1	2	1	...	...	5	3
Totals	...	3	1	5	5	13	10	7	12	11	3	7	31	46

INFECTIOUS DISEASES IN WARDS.—1918.

Disease	Harrogate Hill	North Road	Eastbourne	Cockerton	Pierremont	Central	West	South	Total
Smallpox	17	12	7	10	11	11	7	10	85
Scarlet Fever	63	22	32	101	23	34	18	33	326
Diphtheria	26	29	26	16	14	11	18	17	157
Enteric Fever	—	1	—	1	—	1	1	—	4
Pulmonary Tuberculosis	16	16	19	14	8	13	14	3	103
Other forms of Tuberculosis	10	5	10	10	3	10	6	7	61
Puerperal Fever	—	—	—	2	—	1	—	1	4
Puerperal Pyrexia	2	—	—	1	—	—	2	1	6
Erysipelas	6	6	5	1	1	2	4	1	26
Ophthalmia Neonatorum	3	2	1	—	—	3	2	4	15
Acute Anterior Poliomyelitis	—	—	—	—	—	—	—	—	—
Acute Encephalitis Lethargica	—	—	—	—	—	1	—	—	1
Acute Pneumonia	22	21	21	18	13	15	17	13	140
Malaria	—	—	—	—	—	—	—	—	—
Chicken-pox	73	79	174	79	45	55	73	73	651
Measles and German Measles	27	9	21	46	26	7	10	15	161
Whooping Cough	10	4	4	9	3	4	3	1	38
Total	275	206	320	308	147	168	175	179	1778

NOTIFIABLE DISEASES DURING 1928.

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DISEASE.	Under 1	1—	2—	3—	4—	5—	10—	15—	20—	35—	45—	65—	Total Cases Notified	Total Deaths	Cases Admitted to Isolation Hospital	Deaths in Isolation Hospital
Small-pox	1	2	2	3	1	17	18 (1)	9	16	5	10	1	85	1	85	1
Scarlet Fever	2	2	11	26	18	163 (1)	49	26	25	2	2	...	326	1	316	1
Diphtheria ... ..	...	2 (2)	4	6 (2)	4 (1)	89 (5)	17	15 (1)	14	4	2	...	157	11	152	10
Enteric Fever ... ..	...	...	1	...	...	1	1	...	...	1 (1)	...	...	4	1	3	...
Puerperal Fever ... ..	...	...	...	...	...	...	...	...	3 (1)	1 (2)	...	...	4	3	2	...
Puerperal Pyrexia ... ..	...	...	...	...	...	...	...	...	4	2	...	...	6	...	2	...
Pneumonia	7 (2)	5 (5)	4	5 (1)	7	21	6 (1)	9 (1)	21 (4)	17 (14)	23 (13)	15 (11)	140	52	15	3
Ophthalmia Neonatorum	15	...	...	...	...	...	...	...	...	...	...	...	15	...	...	...
Erysipelas... ..	...	...	...	...	...	...	1	2	5	5 (1)	11 (2)	2	26	3	1	...
Encephalitis Lethargica	...	...	...	...	...	1	...	...	...	...	...	...	1	...	...	...
Measles and German Measles	14	13 (1)	18 (1)	18	19	61	8	3	3	3	1	...	161	2	1	1
Malaria ... ..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Chicken-pox	28	29	47	52	54	377	56	3	3	2	...	...	651	...	...	...
Acute Anterior Poliomy- elitis ... ..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Whooping Cough	4	5 (1)	7	7	15	...	...	...	...	...	...	...	38	1	...	...

Numbers in brackets signify deaths.

INFECTIOUS DISEASES.

The following table shows the number of cases of **Infectious Disease** notified each month during 1928

	Smallpox	Scarlet Fever	Diphtheria and Membranous Croup	Enteric Fever	Pulmonary Tuberculosis	Other forms of Tuberculosis	Puerperal Fever	Puerperal Pyrexia	Erysipelas	Ophthalmia Neonatorum	Measles and German Measles	Acute Anterior Poliomyelitis	Acute Encephalitis Lethargica	Acute Pneumonia	Malaria	Chicken-pox	* Whooping Cough	Totals
January	33	37	11	...	12	5	1	...	2	...	42	...	...	33	...	51	2	229
February	19	28	7	1	12	9	1	1	3	2	8	...	...	15	...	49	...	155
March	11	43	7	1	7	9	...	...	4	1	5	...	...	16	...	37	2	143
April	4	24	7	...	8	4	1	1	4	2	10	...	...	10	...	88	5	168
May	3	23	9	...	14	8	...	...	2	2	12	...	...	7	...	72	5	157
June	5	66	12	...	11	6	...	...	1	...	18	...	...	3	...	77	4	203
July	5	21	10	...	11	5	...	...	4	...	13	...	...	2	...	86	6	163
August	5	15	2	1	8	2	...	2	...	1	13	...	...	6	...	53	...	108
September	...	9	13	...	7	3	...	...	1	2	8	...	...	5	...	24	4	76
October	...	15	21	1	3	2	...	...	...	...	4	...	...	18	...	18	1	83
November	...	23	28	...	5	8	...	2	4	2	10	...	...	6	...	40	4	132
December	...	22	30	...	3	2	1	...	1	3	18	...	1	19	...	56	5	161
Totals for 1928	85	326	157	4	101	63	4	6	26	15	161	...	1	140	...	651	38	1778
Totals for 1927	120	186	40	25	119	59	2	4	22	10	2068	3	7	225	1	439	73	3403

* Cases of Whooping Cough in children under 5 years of age became notifiable as from 1st February, 1927.

Incidence of NOTIFIABLE DISEASES, DEATHS and ADMISSIONS TO ISOLATION HOSPITAL during the past eight years.

DISEASE	1921		1922		1923		1924		1925		1926		1927		1928	
	Notifica- tions	Deaths	Admitted to Hospital	Notifica- tions	Deaths	Admitted to Hospital	Notifica- tions	Deaths	Admitted to Hospital	Notifica- tions	Deaths	Admitted to Hospital	Notifica- tions	Deaths	Admitted to Hospital	Notifica- tions
Smallpox	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Scarlet Fever	198	...	175	155	3	148	106	2	100	143	2	137	154	...	117	120
Diphtheria	61	...	53	60	2	55	47	3	44	40	3	37	38	...	178	186
Enteric (including Paratyphoid)	9	...	8	5	...	3	2	...	...	1	...	1	5	...	38	40
Puerperal Fever	6	...	...	6	1	...	3	1	...	3	...	...	1	...	20	25
†Puerperal Pyrexia	...	...	...	...	3	...	...	...	...	...	2	...	1	...	...	2
Pneumonia (all forms)	104	...	...	197	120	4	116	...	...	184	66	8	217	...	...	4
Malaria	...	...	...	1	...	...	...	...	...	...	...	...	...	73	49	225
Dysentery	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	1
Encephalitis Lethargica	2	...	...	...	...	...	2	2	...	8	1	5	7	...	...	...
Erysipelas	2	...	1	32	3	7	28	1	...	32	1	...	42	1	1	22
Measles and German Measles	96	...	1	377	4	...	1,526	51	...	367	2	2	1,202	17	5	2068
*Chickenpox...	...	...	...	...	...	...	11	...	...	272	...	1	309	...	...	1
Ophthalmia Neonatorum	26	...	...	14	...	...	6	...	...	10	...	1	4	...	...	439
Cerebro-Spinal Fever	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	10
Acute Anterior Poliomyelitis	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
†Whooping Cough	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	3
	...	...	...	...	...	...	...	...	...	...	...	...	73	7	...	38
	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1

* Notifiable since 1923.

† Notifiable since 1st October, 1926.

‡ Cases of Whooping Cough in Children under 5 years of age became notifiable on 1st February, 1927.

SUMMARY OF METEOROLOGICAL OBSERVATIONS, 1928 TAKEN DAILY AT
THE SOUTH PARK, DARLINGTON.

Month	Barometer Reading (Inches)		Temperature Registered (Degrees Fahr.)		Total Rainfall (in inches)	Greatest Rainfall in any 24 hours. Depth (in inches)	Date of Greatest Fall	Number of days on which rain fell .01 inches or more
	Highest	Lowest	Highest	Lowest				
January ...	30.2	29.1	52	23	3.18	0.48	1	28
February ...	30.4	28.9	58	26	1.69	0.35	11	20
March ...	30.1	28.6	58	17	2.93	0.61	12	31
April ...	29.9	29.2	78	26	1.22	0.28	30	20
May ...	30.1	29.3	78	29	1.91	0.53	19	24
June ...	30.3	29.1	79	35	5.50	2.28	13	23
July ...	30.3	29.5	82	40	0.67	0.26	26	9
August ...	30.1	29.4	77	40	3.97	2.04	20	19
September ...	30.3	29.6	75	31	1.07	0.43	1	14
October ...	30.1	28.9	62	24	2.66	0.74	12	22
November...	30.2	28.4	65	24	3.02	0.56	14	26
December ...	30.3	29.2	59	20	1.42	0.23	30	19
Totals ...	...	...	...	...	29.24	...	...	255
Averages...	...	...	...	...	2.44	...	...	21.25

REMARKS ON THE YEAR.

The average rainfall for the last 4 years is 29.23.
 Rain fell on 255 days in 1928 and 249 days in 1927.
 More rain fell in June than in any month since December 1915, when the total was 5.73 inches.

6th January, 1929.

T. J. MORRISON, Superintendent of Parks.

SANITARY INSPECTOR'S REPORT, 1928.

To Dr. G. A. Dawson,
Medical Officer of Health,
County Borough of Darlington.

Dear Sir,

I herewith submit for your consideration, the Annual Report of the late Chief Sanitary Inspector, Mr. Jno. R. Copping, who died suddenly on 28th February, 1929. In doing so, I feel I must add a tribute to the memory of a very capable and respected Officer, one who always tried to do his best in all he undertook. In taking up the duties of Senior Sanitary Inspector for the County Borough of Darlington, I do not under-rate the work before me in following an Officer of such ability and personality, as the late Mr. Copping. However, I know I can always depend upon you for help, even generosity in times of difficulty, and I assure you I shall always endeavour to carry out my duties in such a manner that the confidence you have already placed in me shall not be forfeited. I must also tender you and the members of the staff sincere thanks for the very valuable assistance rendered in carrying out the work of the department.

General Sanitary Work.—During the past year 2,051 Inspections and 5,622 Re-Inspections of houses were made under the Public Health Acts and the Housing and Town Planning Acts. 948 Informal Notices were served upon the owners of property in respect of 2,450 nuisances existing thereon, and in very many cases the nuisances were abated without further action being necessary. The remaining cases where the notices were not complied with, were included in the monthly reports submitted to you. Upon your instructions 457 Statutory Notices for the abatement of 1,478 nuisances were served during the year. The total number of nuisances abated in compliance with notice served during the year was 2,646.

The following is a summary of the various headings under which such notices were served :—

	Number of Nuisances dealt with by Informal Notices	Number of Nuisances dealt with by Formal Notices by Order of the Council	Number of Nuisances abated after Notice
Wellington-houses and Schools—			
Foul Conditions	2	1	3
Structural Defects	1456	952	1543
Washing-houses	2	—	1
Shops and Privies	202	108	221
Deposits of Refuse and Manure	23	5	26
Water Closets—			
Drains stopped up and Defective Fittings	177	71	226
Defective Yard Paving	100	69	89
House Drainage—			
Yard, Scullery, and Cellar Drains, and Down-pipes stopped up and Defective Drains and Traps	351	166	415
No disconnection from Sewer	7	2	7
Water Supply to Houses & Defective Fittings	2	—	2
Water Supply to Water Closets	1	—	1
Animals and Poultry Improperly kept	8	1	7
Defective Sinks or Slopstones	30	16	36
Slopstones	53	46	19
Pansies	28	14	22
Tables—			
No Receptacle for Manure and Defective Paving & Drainage....	2	3	2
Living Vans, Contravention of Bye-laws	—	24	21
Dwsheds	1	—	—
Smoke Nuisances	3	—	3
Filthy Yards	2	—	2
Totals for 1928	2,450	1,478	2,646

Living Vans, Tents, and Sheds.—Notices were served in 24 cases in respect of contraventions of the Bye-Laws relating to the above, and 21 were duly complied with.

Proceedings were taken against the owner of land upon which living vans and sheds were situated, also against eight occupiers of living vans and sheds. The Court made an order for the abatement of the nuisance existing and ordered the removal of the living vans and sheds.

Up to the end of the year, the owner of the said land abated the nuisances complained of to a great extent, and 7 living vans were removed.

One occupier of a living van and a shed did not obey the order of the Court; one did obey, but returned to the land after being away for a short time.

Proceedings for disobeying the said order of the Court were pending at the end of the year. There were also two other colonies of living vans and sheds in the Borough, besides individual living vans occupying various sites in other parts of the Borough.

Whilst many van dwellers may be quite decent citizens, there are, unfortunately, others who can only be described as distinctly undesirable from a sanitary point of view and the residents in the districts wherein are situated these colonies of Living Vans feel they have a genuine grievance at being obliged to tolerate their proximity, and there is no doubt that the time is long overdue when the Borough must seek further powers in order to control what can only be termed a menace to the well-being of the town.

The Housing (Inspection of District) Regulations, 1910.—During the year 193 houses were inspected in accordance with the above Regulations. In 169 cases notices were served for the remedying of sanitary defects, and in 136 cases such notices were complied with.

Increase of Rent and Mortgage Interest (Restrictions) Act, 1920.—During the year no applications were received for Certificates under Section 2 (2) of the above Act.

Sanitary Conveniences.—During the year there have been 8 water-closets substituted for 81 privy-ashpits. In 17 cases these substitutions were carried out by the owners voluntarily, and in the remaining 64 cases under the conversion schemes.

Four privy-ashpits and 1 privy-pan have been removed and 6 water closets substituted where the premises were already provided with a water closet. In 4 of these cases tipping bins, and in 1 case a portable bin, were provided for the deposit of household refuse.

The following is a list of the various forms of sanitary conveniences in use in the Borough :—

Water-closets	....	....	....	....	11,880
Combined Privy-ashpits	....	....	....	....	6,448
Privy-pans	....	....	....	....	165
Old Privy-middens	....	....	....	....	12
Total					18,505

Infectious Diseases.—During the year 326 cases of Scarlet Fever, 157 cases of Diphtheria, 4 cases of Typhoid or Enteric Fever, 26 cases of Erysipelas, 1 case of Encephalitis Lethargica and 85 cases of Small-pox were notified. Detailed enquiries were made in each case and the necessary precautions taken against the spread of infection.

The 85 cases of Smallpox caused a very large amount of extra work as, in addition to the usual enquiries, over 4,734 visits were paid to contacts.

The following are particulars of the fumigation of houses and other buildings, and the disinfection of bedding, clothing, etc., during the year :—

	Fumigations				Lots of Bedding and Clothing Disinfected
	Hos-pitals	Houses	Schools and other Buildings	Rooms	
Infectious Disease other than Tuberculosis, Cancer, etc.	5	551	2	706	549
Tuberculosis	—	36	—	50	25
Cancer	—	5	—	7	7
Measles, etc.	—	5	—	14	6
Totals	5	597	2	777	587

Factories, Workshops and Work-places.—The number of Workshops, including Bakehouses, on the Register at the 31st December, 1928, was 417, and the number of Factories, 184.

During the year 680 Inspections have been made and the following is a list of the defects found and dealt with :—

FACTORIES, WORKSHOPS AND WORKPLACES.

	Found	Re- medied
Want of cleanliness	4	3
Want of ventilation	2	2
Other nuisances	13	11
Sanitary Accommodation—		
Insufficient	3	—
Unsuitable or Defective	25	20
Want of cleanliness....	6	6
Not separate for sexes	3	3
Not separate approach	1	1
Not provided with proper means of escape in case of fire	1	1
Total	58	47

Four notices of defects to be dealt with under Public Health Acts were received from the Factory Inspector, and in each case the premises were inspected, notices served where necessary, and the defects, in all cases but one, were remedied.

Outworkers.—22 lists containing the names of 26 Outworkers, were received and 6 inspections of the premises of such Outworkers were made.

Food and Drugs.—During the year 245 samples were taken for Analysis as follows :—

New Milk	127
Spirits	12
Provisions, etc.	106
Total	245

Of the 127 samples of New Milk, 61 were from Purveyors of Milk carrying on business in the Borough and 66 from Purveyors of Milk carrying on business but not residing in the Borough—109 samples were morning samples and 18 were afternoon samples.

126 samples of New Milk, and 12 samples of Spirit, were Formal Samples, and the remaining sample of Milk, and the 106 samples of Provisions, &c., were Informal samples.

208 samples were of genuine quality and 37 were below standard.

Of the 37 samples below standard, 33 were of milk, and 4 of Provisions and the following are particulars of the action taken :—

Samples Nos, 1, 17, 47, 48, 50, 51, 56, 57,			
81, 83, 84, 97, 203, 204, 205, 206	....	No action taken.	
Samples Nos. 42, 43, 44 and 45	....	Reported to Police.	
Samples Nos. 64, 68, 88, 101, 194	....	Further samples taken.	
Sample No. 65	....	Fined 10/- and Costs.	
Sample No. 69	....	Fined 10/- and Costs.	
Sample No. 70	....	Case dismissed.	
Samples Nos. 71, 72, 73, 108, 109	....	Appeal samples.	
Sample No. 74	....	Case Withdrawn.	
Sample No. 77	....	Case dismissed.	
Sample No. 78	....	Case dismissed.	
Sample No. 92	....	Case dismissed.	

MILK (Special Designations) ORDER, 1923.

The Special Designations under which Milk may be sold in pursuance of this Order are :—" Certified," " Grade A (Tuberculin Tested)," " Grade A " and " Pasteurised."

During the year 2 Licenses were granted for the Sale of Pasteurised Milk and they are the only 2 Licenses now in operation in the Borough under the above Order.

MILK AND DAIRIES ORDER, 1926.

There were 20 Milk Producers and 151 Milk Retailers upon the Register at the 31st December 1928, 3 Producers and 15 Retailers having discontinued and 2 Producers and 19 Retailers were added to the Register.

There are 46 persons retailing milk in the Borough who reside outside the Borough Boundary, an increase of 9 as compared with the previous year.

There were 20 cowsheds on the register in the Borough, one being discontinued during 1928. These were frequently inspected by the Sanitary Inspectors and have been conducted in a fairly satisfactory manner. Owing to the death of Mr. F. H. Sanderson, no Veterinary Inspection was carried out. A Minute was submitted to the Markets, etc., Sub-Committee, held on the 14th November, 1928. relating to the appointment of a Veterinary Surgeon in succession to the late Mr. F. H. Sanderson.

It was resolved that the consideration of the matter be deferred, and that in the meantime the chairman obtain information as to the possibility of securing the services of the Veterinary Inspector appointed by the Durham County Council.

It may be opportune to state here that the two Assistant Sanitary Inspectors and myself (then Chief Assistant) attended a course in the Hygiene of Milk Production, for Sanitary Inspectors held at Middlesbrough during October, November and December of 1928, held by the University of Leeds and the Yorkshire Council for Agricultural Education.

The subjects dealt with included :—

- (1) The Chemistry of Milk.
- (2) The Bacteriology of Milk.
- (3) A general survey of the Milk industry; legislation farm buildings; clean milk methods in cowsheds and dairy.
- (4) Health of cattle in relation to the production of milk.

The latter portion was presided over by H. E. Bowes F.R.C.V.S., Lecturer in Veterinary Hygiene and was most valuable to the Sanitary Inspector, in as much, at each visit made to the Cowsheds in the Borough by the Inspectors any abnormal condition obtaining in reference to the health of the cows would have been reported to you. I am pleased to state that no abnormal condition was noted.

Before concluding these notes on milk, I would like to mention a subject very closely allied—Ice cream, its manufacture and distribution. Up to the present, Darlington has not had any serious outbreaks of illness traceable to this popular commodity. At the same time I feel that steps should now be taken to obtain special powers to further control the making and selling of Ice Cream. We must not forget that it is the children who are the principal consumers of this article and it should be made possible by registration to prevent Ice Cream being made in improper places and under dirty conditions. As the law stands at present the Inspector must definitely prove contamination. We want to anticipate this and in so doing protect the public from a very potential menace to health.

Milk and Cream Regulations, 1912 and 1917.—The whole of the 127 samples of New Milk were examined for Preservatives but in no case was any Preservative found. No samples of Cream were taken.

Inspection of Meat and other Foods.—The total number of beef and veal animals inspected at the time of slaughter or immediately afterwards was 6,126, which is about 90 per cent. of the total beef and veal animals slaughtered in the Borough.

There have been 136 cases of emergency slaughter, involving 55 cows, 10 bulls, 19 bullocks, 27 heifers, 6 calves, 6 sheep, 5 lambs and 8 pigs, notified for inspection, and as a result of these inspections the carcasses and all organs of 8 cows, 2 bullocks, 5 heifers, 1 calf, 4 sheep, 2 lambs and 3 pigs, and portions only of the carcasses of 11 cows, 2 bulls, 5 bullocks, 9 heifers, 1 sheep, 4 lambs, 1 calf, and 5 pigs were condemned and destroyed.

Of the above cases 71 animals were killed and dressed outside the Borough and 65 in Slaughter-houses in the Borough.

There were also 117 pigs slaughtered by or on behalf of Allotment Holders who are not butchers, the time and place of slaughter having been notified. Of these 1 pig was totally condemned and destroyed. Eighty-one of these pigs were slaughtered in licensed slaughterhouses in the Borough, the remaining 36 pigs were slaughtered and dressed on the various allotments. This was due to the fact that the Butchers in the Borough refused to allow the Allotment-holders' pigs to be slaughtered in their slaughterhouses. In each case the place and time of slaughter was notified by the owners of these pigs and the shed or other place wherein the Pigs were slaughtered was thoroughly cleansed before permission was given to slaughter. This entailed a heavy strain on the Inspectorate as most of these animals were killed during the week preceeding Christmas, at a time when the attention of the Inspectors was much needed in the inspection of foods generally. If a public slaughterhouse had been in existence at the time, it would have been a great boon to all concerned.

The total weight of food condemned and destroyed during the year was 14 tons, 10 cwts., 5 stone, 8½ lbs.

The whole of the food condemned was voluntarily surrendered by the owners and destroyed.

The following is a brief Summary of all Food condemned during the year :—

Summary.

	<i>Tons</i>	<i>Cwts.</i>	<i>Stones</i>	<i>Lbs.</i>
76 whole Carcasses and all organs	12	10	3	8
Portions of Carcasses	0	8	3	2
44 sets of Lungs	0	4	3	4
71 Livers	0	7	5	2
20 Heads and Tongues	0	4	3	10
Mesenteries and Pigs' Plucks	0	0	3	10½
Udders	0	1	0	12
Kidneys and Skirts	0	0	2	13
Tinned Foods, etc.	0	1	3	7
Imported Meat	0	11	4	8
Stomachs	0	0	3	2
<hr/>				
Total of Meat and other Foods condemned	14	10	5	8½

Slaughter-Houses.—The number of licensed private slaughter-houses in use at 31st Dec., 1928, was 39. The whole of the slaughter-houses are held on License, 13 being for 12 months, 10 for 6 months, and 16 for 3 months, and during the year 4,757 inspections were made.

The question of concentrating the slaughtering in the Borough is still under consideration by the Special Sub-Committee, and it is hoped that the erection by the Corporation of a Slaughter-house at the Cattle Market to provide accommodation for the Butchers who would be dispossessed under the proposed scheme will soon be an accomplished fact.

PUBLIC HEALTH (Meat) REGULATIONS, 1924.

There have been breaches of these Regulations by 7 Butchers during the year, and warnings were given by letter in each case.

Offensive Trades.—During the year 7 applications were made for Fish Fryers' Licences, and all refused.

The number of premises now used for offensive trades and duly licensed is 36 as follows :—

- 1 Gut Scraper.
- 30 Fish Fryers.
- 1 Fellmonger.
- 1 Fat Rendering and Tripe Boiling.
- 2 Fat Rendering.
- 1 Rag and Bone Dealer.

There are also 29 Fried Fish Shops in the Borough not on the Register, having been established prior to the date of the Order under which they were Scheduled as Offensive Trades.

One Licensed Rag and Bone Dealer's business has been discontinued during the year.

The whole of the premises are under supervision, and are kept in a fairly satisfactory condition.

Shops Acts, 1912-13, and Shops (Early Closing) Act, 1920, and Amendment Act, 1921.—There are still 2 Compulsory Orders in operation affecting respectively shops in which is carried on the Sale of Meat, and shops in which is carried on the Sale of Fruit, Vegetables and Flowers, and 3 Orders under the Shop Hours Act, 1904, affecting Chemists and Druggists, Hairdressers and Barbers, and Boot and Shoe Dealers.

During the year there have been several contraventions of the above Acts and Orders, and written or personal warnings were given to the offenders.

Fertilizers and Feeding Stuffs Act, 1926.

The above Act repeals the Fertilizers & Feeding Stuffs Act, 1906, and came into operation on the 1st July, 1928.

The late Mr. Copping was appointed Inspector and Official Compiler under the Act, and Mr. C. J. H. Stock, Agricultural Analyst, and such appointments have been approved by the Ministry of Agriculture and Fisheries. It has not been found necessary to take any action under the above named Act.

Rats and Mice (Destruction) Act, 1919.

The total number of rats actually killed by the Rat Catcher during the year was 1,341, but these figures do not include the rats that were poisoned.

The following are the principal places at which the rats have been destroyed :—

Snipe Tip	....	....	....	....	1,056
Sewage Farm	....	....	....	....	36
North Road Tip	....	....	....	....	186
Grange Road Tip	....	....	....	....	25
Sundry Premises	....	....	....	....	38
					<hr/>
					1,341

Two Informal Notices were served and complied with.

Common Lodging-Houses.—There are 4 Common Lodging houses on the Register, with accommodation for 401 lodgers.

The whole of the lodging-houses are regularly and frequently inspected, and the same are kept in a fair food condition and the Bye-Laws fairly well observed.

In conclusion, I trust this report will be satisfactory to you in every respect.

I am,

Yours respectfully,

ALBERT EDW. WADE,

Senior Sanitary Inspector

County Borough of Darlington.



ANNUAL REPORT

OF THE

SCHOOL MEDICAL OFFICER,

G. A. DAWSON, M.D., D.P.H.,

FOR THE

Year ending 31st December, 1928.

DARLINGTON :

THE SKERNE PRINTING COMPANY (1927) LTD., GARDEN STREET,

1929.

COUNTY BOROUGH OF DARLINGTON.

*To the Chairman and Members of the
Education Committee.*

Ladies and Gentlemen,

I have the honour to submit the Annual Report of the work of the School Medical Service for the year ending 31st December 1928.

Three routine inspections of Elementary School children, along with the special inspections and re-inspections of other age groups were carried out. The growing co-operation of parents, head teachers and staff, as noted in previous years, continues, reflecting a high degree of interest in the future welfare of our town.

During the year the new Barnard School was opened, and already much success has been noted in the very difficult work of that Special School. Our first Health Week on a large scale in Schools was held during November and proved to be an excellent stimulus to teachers, scholars and parents.

The New Open Air School at Harrowgate Hill, which is almost completed, will supply a long felt want in providing for the education of 120 debilitated boys and girls under ideal conditions.

The work during the year has been excellently maintained by the same colleagues as in the previous year, and I wish here to record my great appreciation of their worth.

I have the honour to be,

Your obedient Servant,

5th April, 1929.

GEORGE A. DAWSON.

STAFF OF SCHOOL MEDICAL SERVICE.

School Medical Officer—

G. A. DAWSON, M.D., M.B., B.Ch., B.A.O., D.P.H.

Assistant School Medical Officers—

ISOBEL C. BROWN, M.B., Ch.B., D.P.H.

THOMAS FERGUSON, M.D., F.R.C.P. (Ed.), D.P.H.
(part time).*Ophthalmic Surgeon—*

A. T. PATERSON, M.D., F.R.C.S.E., D.P.H.

(Commenced duties 16th February, 1928).

W. S. THACKER-NEVILLE, M.D., F.R.C.S.I.

(Resigned 8th February, 1928).

School Dental Officer—

J. I. LIDDELL, L.D.S.,

Nurses—

AGNES GARDNER (Senior Nurse).

CATHERINE GARDNER,

GLADYS M. WHITTAKER.

Clerks—

DORIS M. BURRELL.

ELIZABETH DENT,

MAY CHARLTON.

INTRODUCTION.

The Darlington School child of to-day will bear very favourable comparison with the child of any of our Northern towns, and certainly a very much better specimen than the pre-war child, far as we can judge from pre-war statistics of height and weight. The five-year old child is approximately 3 lbs heavier than the prototype of 1910, chiefly owing to the work of our Maternity and Child Welfare Branch of the Public Services, while the 12 year-old child is 4 lbs heavier. The closer co-ordination of all our health services, particularly that of our Maternity and Child Welfare work for the pre-school child with that of the School Medical Service, by the establishment of routine inspection of all our pre-school children at our Clinics and Nursery School by the Medical Officers, will further improve on the success we have already attained.

Health is a possession to be prized, yet valued only when it has been lost. It does not come by chance. Though it is a birthright, it is not entirely acquired by heredity. Its chief source is education and self discipline. Though we agree "that the home hearth is the real nursery" or should be the real nursery of childhood, no effort should be spared to impress a school influence and have it carried into the home. That hygiene can be made extremely popular amongst children, has been recently demonstrated by the Health Week organized during November, during which an unmistakeable enthusiasm was aroused in all practical health work. The work should be part and parcel of the curriculum. Undoubtedly the school period is the age at which to introduce the vital subject. The teaching of theory only avails, when healthy living becomes a habit.

The essential part of our educational programme is the inculcation by the teacher of the ideals of right thinking and right living in an atmosphere of fresh air, sunshine and practical demonstration.

NUMBER OF SCHOOLS AND SCHOLARS.

The following table shows how the school population is distributed throughout the Secondary, Elementary and Special schools as on the 31st December, 1928.

Grammar School (Boys)	380
High School (Girls)	337
Central Secondary School (Boys and Girls)	336
Junior Technical School (Boys)	158
13 Council Elementary Schools, comprising 21 Departments (Boys and Girls)	7,589
8 Non-provided Elementary Schools comprising 11 Departments (Boys and Girls)	2,697
Barnard School for Sub-normal Children (Boys and Girls)	66
Open Air School (Girls)	56
Total	11,619

The **Number of Children** in the elementary schools at mid-year, 1928, was divided up as follows :—

Boys' Departments	3,428	} Total 10,635
Girls' Departments	3,557	
Infants' (Mixed) Departments	3,650	

MEDICAL INSPECTION.

The number of children submitted to routine inspection in the Elementary Schools was 3,065; in addition to these 2,631 children were examined for special reasons and 9,536 were re-examined. At the Secondary Schools 3 routine inspections of entrants, intermediates and leavers were held, and 1,003 pupils were examined. The Nursery School was visited weekly.

In addition to the routine inspections, 194 children were medically examined as candidates for Scholarships in the Secondary Schools. Routine inspections at the Elementary Schools were in general made only twice during the year so as to avoid the loss of time which often occurs when there is only a small number of children to be examined at a school.

Of the 3,065 children submitted to routine inspection in the Elementary Schools (see Table II.), 454 were found to be suffering from defects (other than uncleanness, defective clothing and footgear, and dental diseases) which required treatment; 1,15 had defects which necessitated their being kept under observation. Details of these defects are set out in the Tables at the end of this Report.

The percentage of children found at routine inspection to require treatment has fallen to a record low figure of 14·8%

Weight of School Children.—The following table compares the weight of the school children examined in 1927 and 1928 with corresponding weights before the war, and also with average weights of Elementary School children in England and Wales as given in “The Health and Physique of School Children,” published by the Ratan Tata Foundation in 1913.

Weights in Pounds.

	Age 5		Age 8		Age 12	
	Boys	Girls	Boys	Girls	Boys	Girls
England & Wales 1913	38·5	37·6	52·2	49·8	73·0	73·9
Darlington, 1910 ...	38·2	37·1	...	...	...	...
„ 1914 ...	39·3	38·0	...	...	71·0	70·7
„ 1927 ...	41·5	39·8	53·1	51·7	77·0	77·8
„ 1928 ...	41·2	39·8	53·4	51·6	76·9	79·5

The general increase over pre-war figures is well marked.

Uncleanliness.—Routine medical inspection does not, for obvious reasons, afford a good measure of the prevalence of uncleanly conditions. The routine surprise surveys by the Nurses are a better guide to the actual state of affairs.

The School Nurses paid 302 visits to 22 schools, and made 64 home visits in connexion with the cleanliness of the children. For this purpose 17,076 examinations of children were made, and in 622 cases (3·6 per cent.) nits were found in the hair; verminous bodies were found in 2 cases. All these children were inspected at intervals of two or three weeks, and at the end of the terms nits were found in only 122 cases, all of which showed improvement.

Tonsils and Adenoids.—Of the children examined during routine inspections 467 (15.2 per cent.) were found to have adenoids, unhealthy tonsils, or both. Operation was advised in 140 cases (4.5 per cent.), but in the less severe cases palliative measures were recommended and explained to the parents. The want of correct training in handkerchief drill and nose breathing predisposes to this defect, with its subsequent deformities of the shoulders, and chest diseases.

Tuberculosis.—Ten cases of definite pulmonary tuberculosis were found in the course of medical inspection. Of non-pulmonary forms cervical glands were involved in 2 cases, and bones, joints, the skin and other organs in 5 cases. In addition to these many of the cases returned under Bronchitis are being kept under careful observation.

Skin Disease.—There were 57 children referred for treatment on account of skin disease. Several of these children were excluded from school until treatment was completed and they were certified free from infection by a medical officer.

Vision.—The percentage of the 7-8 and 12-14 year old children found to have defective vision needing treatment, is shown in the following table:—

	7-8 Years			12-14 Years		
	No. examined	No. referred for treatment	Per-centage	No. examined	No. referred for treatment	Per-centage
Boys ...	660	28	4.2	341	45	13.2
Girls ...	620	38	6.1	431	56	13

Ear Disease and Deafness.—Twenty-nine (.9 per cent.) children were found to be suffering from ear disease or deafness, and were referred for treatment. Infectious diseases (especially measles) and adenoids are the exciting causes in nearly all cases. Discharging ears, once so common and so objectionable in a class-room, are not nearly so numerous.

Nurses follow up work.—The following up of defective children by the nurses is one of the most valuable and necessary branches of our work. For the purpose of following up defects other than uncleanness, the School Nurses paid 2,174 home visits.

Medical Examination of Teachers.—Forty-two Teachers and 4 Caretakers were medically examined during the year by the staff.

INFECTIOUS DISEASES.

There was no serious outbreak of Infectious Disease during the year. The contacts excluded, or kept under observation at the schools, amounted to a total of 1,038 scholars.

Smallpox.—Mainly owing to the close supervision of all suspected cases Darlington has not suffered severely.

There were notified and removed to the Isolation Hospital 35 cases of Smallpox amongst children of school age, compared with 50 cases in the previous year. Though the prevalent type was on the whole mild, we had one death, directly due to smallpox in a girl of thirteen years of age. Needless to add, vaccinated children escaped.

Chickenpox, which is always notifiable in the presence of Smallpox, accounted for 433 notifications amongst children of school age. In each case a member of the Staff verified the diagnosis.

Scarlet Fever.—Two hundred and twelve cases were notified. There was only one death. The good results were largely due to the mild type of the present form and to the use of the new serum treatment in the severe cases.

Diphtheria.—This disease is certainly one of the most treacherous of diseases amongst our school children. During the year there was an increase in both incidence and virulence. There were 105 cases with 5 deaths. The protection of the individual by means of the Schick Test and subsequent immunization would serve to reduce the number of these cases and deaths.

Measles and German Measles.—These two diseases exhibit alternate years of appearance in epidemic form. While 1927 was an epidemic year with 3,500 cases of children of all ages and 17 deaths, 1928 was a very quiet year with only 69 cases and no deaths.

It is important that mothers should realize that Measles and Whooping Cough usually considered so trivial are really two of the greatest enemies of our child life.

School Closure.—It was not found necessary to advise the closing of the schools by reason of epidemic illness, and it is also gratifying to report that at no time during the year was it necessary to give the usual certificate for grant purposes by the School Medical Officer under the Elementary Education Provisional Code, 1922, when the attendances in any Department fall below 60% owing to Infectious Disease.

Tuberculosis.—Eighteen cases of Pulmonary and 32 cases of Non-Pulmonary Tuberculosis were notified during the year. Tuberculosis accounted for 13 deaths of children of school age.

HEALTH WEEK.

In conjunction with the Maternity and Child Welfare and the Health Committees a special Health Week was held during the period 4th to 10th November, 1928.

The Campaign proved a complete success, and exceeded expectations in the public interest which was aroused, chiefly in the schools and cinemas. Special posters and handbills were printed and distributed in the schools, the clinics, workshops, cinemas and places of amusement. Through the co-operation of the Press the subject of health was kept in the forefront during the whole week, in the morning and evening papers. The present-day appeal of the Cinema was used as the medium for the better part of the propaganda and through the willing co-operation of the Managers of all the Picture Theatres in the town fifteen special films dealing with Dental, Maternity and Child Welfare and Mental Welfare subjects were exhibited. Four special sessions were held for the senior scholars at the Empire and Scala Picture Theatres. Almost 4,000 children, along with the 180 students from the Training College attended. Introductory and explanatory addresses were given by the Mayor, the Ex-Mayor, Councillor A. J. Best and Councillor Chandler, who acted as Chairmen, and by the Medical Officer of Health.

In the schools special lessons were given based principally upon "The Handbook for Teachers" prepared by Sir George Newman, Chief Medical Officer of the Board of Education. The Head Teachers exhibited their intense keenness in presenting the subject in the most interesting manner, most of them realizing that a Health Week has the important task of introduction of a Health Year, in cultivating that practice and sense of duty, and that health conscience which is essential for the protection of our future well-being.

In order to carry on the good work, health leaflets and posters will be distributed from time to time.

The following is a list of the films exhibited during the week :—

“ A Brush with the Enemy ”	}	Dental Films
“ Don't wait till it hurts ”		
“ Your Mouth ”		
“ Tommy Tueker's Tooth ”		
“ Care of the Teeth ”		
“ The Leaflet ”		
“ A Place in the Sun ”	}	Maternity and Child Welfare Films
“ Motherhood ”		
“ The work of an Infant Welfare Centre ”		
“ Who was to Blame ”		
“ Our Children ”		
“ Empire Builders ”		
“ Almost a Tragedy ”	}	Health and Cleanliness Films
“ Giro the Germ ”		
“ Central Associaation for Mental Welfare ” Film.		

ANTHROPOMETRIC INQUIRY.

Two years ago at the instance of a Board of Education Committee, of which Sir George Newman is Chairman, we arranged to carry out an inquiry into the present day Anthropometric Standards reached by the children in our Elementary Schools. It was felt that the time had come for a new stock-taking throughout the country and in obtaining particulars of approximately 24,000 boys and girls, from representative areas, the practical material has been provided as a basis for expert consideration and conclusions.

In Darlington we collected statistics of 371 boys and 272 girls. A full report on the data is now in preparation under the immediate supervision of Professor N. Greenwood, F.R.S. So far we have received a special report on the heights and weights of the children. It is important to remember that different age groups are very unevenly represented in different sets of measurements, and for that reason in addition to general averages the means for narrow ranges of age strongly represented in a local sample are also given, and, of course, the age groups selected cannot be the same in all areas.

The particulars taken included details of the parentage, the nationality, the Country of birth and the occupation, the position of the child in the family, sitting and standing height, weight, chest measurements, colour of the eyes, colour of the hair, measurements of the head, and any abnormality or disease likely to influence the particular case.

In the case of the 371 boys examined in Darlington, the mean age was 9.5 years, and the mean height 50.1 inches. The "expected" height, which was based upon the calculation of the whole of the data received from all areas, was 50 inches, so that the actual mean height was not significantly above the standard. The weight, however, showed an increase of one pound per individual.

In the special report of the 272 girls, the mean age was 8.6 years and the mean height was 48.7 inches, while the "expected" height from all areas was 48.3 inches, a difference of .4 inch. The mean weight was 54.7 lbs, compared with a "expected" weight of 54.2 lbs, a difference of .5 lb.

No suggestion is made and none implied that a difference between a local and a general average implies superiority or inferiority of physique. We look forward, however, with interest to the preparation of the full comparative statement.

RHEUMATISM.

It is now recognised that Rheumatism is not only a common disease in childhood but that its manifestations are usually more serious in early than in later life.

This year, as last year, special attention has been paid to the observation of rheumatic affections in children of school age. Children found to be suffering from the disease have been kept under very close observation at the School Clinic and examined at regular intervals throughout the year. At the present time 40 such cases are in regular attendance at the Clinic. A special report on these children has been drawn up.

The cases coming under observation at the Clinic are naturally not children who are actually suffering from an acute attack of the disease, but children who are in danger of developing an attack or who are suffering from the after effects of an acute attack. The outlook as to the child's future health and the chance of the disease returning depends largely on the amount of care that is taken of him during these periods.

Certain children are predisposed to Rheumatism and a child who has once suffered from any form of Rheumatism is always in danger of having other forms of the disease. This danger can be greatly lessened by care and prompt action on the part of the parents and it is in such cases that the Teacher can help in drawing the attention of the Parent or the Medical Officer to the condition of the child during school hours—such conditions as tiredness, loss of colour, undue restlessness, twitchings—indefinite signs of ill health in any child in the class.

Once again, for many cases at present under the care of the School Clinic, the Medical Officer has to thank the child's teacher for having drawn attention to the condition.

Warm, dry clothing and footgear, is most essential for these children and in some schools certain facilities are provided for the drying of wet outdoor clothing, but in others the facilities are quite inadequate and children arriving at school are not only allowed to sit in school with damp feet, but have no chance of having their outdoor clothing dried before putting them on again.

Moreover, parents must realize that, no matter what the fashions may be, our Northern climate demands adequate heat retaining garments especially for the lower limbs. Long stockings made entirely of wool should be worn by those children showing evidences of sub-acute rheumatism.

It is also suggested that slippers be kept at school particularly for those children with very defective footwear and those who have to travel long distances. The wearing of the present popular rubber Wellington Boots indoors is to be deprecated.

A survey of 50 cases of Rheumatism in Elementary School Children in attendance at school during 1928.

Of the 50 cases examined, 24 were boys and 26 were girls.

In 32 cases some definite site of focal infection was found either to have existed until shortly before examination, or actually to be in existence at the time of examination—such conditions as the enlargement of tonsils and adenoids, dental sepsis and otorrhoea. In all such cases operative or other treatment was advised when this had not already been carried out—this was always followed by some degree of improvement.

In 2 cases a history of Scarlet Fever was given. In 16 cases the condition was found to have followed an attack of Rheumatic Fever. Twelve cases showed a general debilitated condition of the child which was put down to “maternal inefficiency”—existing over a prolonged period, when the child had had insufficient or unsuitable food, defective clothing and footgear and insufficient rest, resulting in a condition of general weakness, thus lowering the resistance on the part of the child to any micro-organism.

All the children on examination were found to be suffering from indefinite pains in limbs and joints, associated with tiredness, listlessness, loss of appetite, headaches, breathlessness and pallor with or without twitchings. In the parent's own words the child was described as “falling off.”

These attacks appeared at intervals over varying periods, the child being able to attend school intermittently and then, complete collapse, when attendance was impossible.

Only 2 cases showed signs of serious organic heart disease.

RICKETS.

A special summary has been made this year of children found to be suffering from Rickets.

21 boys and 21 girls were found to be suffering from rachitic deformities varying in degree and of these 6 girls and 6 boys were referred to Hospital for artificial sunlight treatment or surgical treatment.

All other cases were kept under observation both at the Clinic and at the schools and parents were advised as to general and dietetic treatment. Cases showing marked degree of deformity were fortunately found to be rare and all such cases are receiving hospital treatment and are showing marked improvement. Cases which have had surgical treatment for deformities show excellent results.

It is most gratifying to note that the parents of children found to be suffering from rickets show great interest in their progress and make every effort to carry out instructions given to them.

PROVISION OF MEALS.

The 3 centres for the provision of free meals at Borough Road, Rise Carr, and St. Augustine's Schools, have been closed and during this year no provision has been made by the Authority. This is a matter for regret particularly during this period of distress and unemployment in the town.

The nutrition of the child is the fundamental index of its health and malnutrition is one of the most serious defects, as it forms the basis of many and affects them all.

While few children have been found during the year to be suffering from actual malnutrition yet many are malnourished and the only satisfactory solution of this problem is detection and prevention in the early stages.

To secure good nutrition, sufficient and suitable food is the first requirement. This can be provided by the great majority of parents and many have been advised by the Medical Officer as to a suitable economical dietary, but there are others where, owing to poor home conditions, a healthy dietary cannot be provided. These are the cases which will suffer from the closure of the centres and the Authority would do well in the interests of the health of the School Child to consider the re-opening of the centres during the coming winter, or at any rate the provision of milk or cod liver oil emulsion to those cases medically certified as requiring additional nourishment. A special inquiry and report prepared by Dr. Corry Mann recently proved beyond doubt the good results to be achieved by a daily ration of milk in the Schools.

SANITARY CONDITION OF SCHOOLS.

During the year a special report has been prepared on the Sanitary condition of every Elementary School. On presentation of this report to the Committee several general recommendations were made (1) on the general condition of the schools, and (2) on each school, giving details relating to the buildings, lavatory and office accommodation, cloakrooms, and general cleanliness of schoolrooms.

The reports on individual schools indicate that in the majority of schools, the Caretakers' duties are satisfactorily carried out, but that in certain schools there is room for improvement, and in these cases instructions were given that the attention of the caretakers be drawn to the points raised. Further inspections will be carried out later, when it is hoped that a satisfactory standard of cleanliness will be found in all schools, especially in the lavatories, offices, and urinals.

It is desired also, that the suggestion with regard to the provision of pens and pencils in a bag or other container, for individual children should be followed, so as to ensure the use of these articles by only one person.

Sanitary Conveniences.—Regular flushing should be carried out four or five times daily of both water closets and urinals where there is not continual flush. With a few exceptions water closets are cleansed from a general cistern, the control of which is entirely in the Caretaker's hands. At present the regulation is that all water closets should be flushed at mid-day and at night, and the tanks left empty. It is suggested that the flushing should be carried out as follows :—

1. Between 9 and 10 a.m.
2. After morning interval.
3. Before afternoon session.
4. After afternoon interval.
5. After closure of school.

This also applies to urinals, the majority of which, even in schools otherwise well regulated, are in an insanitary condition.

Routine daily inspection of offices by the Head Teacher is strongly advocated. Sanitary paper should be provided in all schools, as the soiling of children's clothing is accountable for much of the unpleasant atmosphere.

Washing Facilities.—As a general rule basins are provided but these are frequently dirty. Brass taps are not cleaned regularly and some are out of order. Towels are provided but too often they are not clean. Soap is conspicuous by its absence in many cases. It is recommended that routine inspection of basins and taps be carried out by the responsible persons ; that clean towels and soap be provided daily.

Drinking cups are found in only a few schools. There should be no exception in providing adequate drinking facilities for all.

General Cleanliness.—The use of Dusmo on the floors in Senior Schools, with the washing of desks and window ledges in all schools is approved, but not in Infant Schools and certain schools used frequently for evening meetings. In Infant Schools the soiling of the floors which sometimes takes place requires scrubbing for complete removal.

Pens and Pencils.—Individual provision of pens and pencils should be made. In some schools each child has a small bag attached to his seat in which are kept pen, pencils, and books; but in others pens and pencils are kept by teachers in a common box. Many of these pencils in the common box were found tooth marked, so that the method is not conducive to the prevention of spread of infection.

With regard to the various other matters raised in the report, the following recommendations were made :—

(a) **Towels.**—In future Caretakers will be required to provide clean towels in the school lavatories each day, and at other times as required by the Head Teacher.

(b) **Sanitary Paper.**—Sanitary roll fittings and paper will be provided for all schools. Supplies of sanitary paper may be obtained from the Office on forwarding a requisition card stating requirements. Every effort should be made to prevent sanitary paper being wasted.

(c) **Soap.**—Soap for scholars' use should be available in the lavatories during the day time. Supplies may be obtained from the Office on submitting a requisition card.

As an experiment liquid soap, in metal containers, will be tried in two or three schools.

(d) **Cleaning of School Floors.**—All floors of Infants' Departments are to be washed during the Summer, Christmas, Easter, and Whitsuntide vacations, and at other times when considered necessary.

(e) **Drinking Cups.**—will be provided in all schools. Head Teachers are asked to make suitable arrangements for seeing that the cups are kept clean.

(f) **Ventilation.**—Head Teachers are asked to arrange for every door, window, and ventilator, to be thrown open at least during the morning and afternoon interval, to flush the room with fresh air, and when the weather permits for classes to be held in the open air as far as practicable, approaching as near the Open Air School ideal as possible.

Cloak-rooms.—Too much cannot be said concerning the importance of bright well ventilated cloak-rooms with an individual peg or locker for each child's shoes and clothing, and furnished with drying facilities. In our new schools attention is being given to this essential point in seeing that scholars will have an opportunity of donning dry garments for their return home.

MEDICAL TREATMENT.

The treatment of minor defects is carried out by the Assistant School Medical Officers and the Nursing Staff at the School Clinic, 5, Northgate. These premises, although commodious, have been taxed to their utmost and during the past year arrangements have had to be made for the provision of an additional waiting room where the overflow is dealt with, thus avoiding undue crowding of the General Waiting Room and Treatment Clinic.

The accommodation provided is as follows.—

Ground Floor.

- Waiting room for 50 children and parents.
- Treatment Clinic and store room.
- Examination Room.
- Medical Officer's room.

Upper Floor.

- X-ray apparatus.
- Dental Department.
- Eye Department.
- Clerical and Records room.

The number of separate attendances was 19,027, of which 14,650 were for treatment, and 4,277 for advice. For 1927 the respective figures were 16,904, 11,579 and 5,325.

From these numbers it will be seen that there is an increase both in the number of separate attendances and in the number of cases found to be requiring treatment. This does not indicate that the number of children found to be suffering from minor ailments is increasing, but that the parents are showing themselves more anxious of taking advantage of the facilities offered to them rather than relying entirely on home treatment.

Minor Ailments.—A Minor Ailment may, for practical purposes, be described as a defect usually considered trifling which can be given treatment at a School Clinic. It does not require in-patient treatment nor a high degree of surgical skill though, in some cases, the condition is a symptom of disease which is later referred for specialist advice.

Impetigo or infectious seab again provided the majority of our cases, accounting for 1,018. There were 113 new cases of ringworm, compared with 153 in the previous year, and 28 cases still under treatment from 1927. Four cases were treated at home. Of the 137 cases treated at the Clinic, 69 were of the scalp, 2 of these were treated by epilation with X-rays, and 67 by other methods. Ringworm of the body, which is very much more amenable to treatment, accounted for 72 cases; of the 137 cases, 121 were cured and re-admitted to school during the year, leaving 16 still under treatment.

Thirty-three cases of scabies were treated, and precautionary instructions given on disinfestation.

The Children who received treatment on account of ear diseases numbered 156; the great majority of these were suffering from ear discharge. Such cases invariably arise from disease conditions in the throat, and advice or appropriate treatment of the exciting cause is also given.

Tonsils and Adenoids.—The principal defect of the nose and throat in school children is that of enlarged tonsils and adenoids caused by a combination of factors which include, heredity, faulty breathing, defective clothing or housing conditions predisposing to catarrh and infection. During 1928 operations were performed on 212 cases of adenoid growth and enlarged tonsils in children of school age at the General Hospital, of these 100 were sent from the School Clinic, and the remainder from other sources in the town.

In the case of minor defects not requiring operation, and for those who have undergone the operation, advice in nasal hygiene and in remedial breathing exercises is given.

Eye Defects.—Spectacles are provided at contract prices, or in necessitous cases. On the whole the objections of parents whose attention has been drawn to the fact of the necessity for the provision of spectacles and the ultimate benefit, are not as numerous as in previous years. The old objection that the wearing of glasses would deter the appointment of a scholar in later life is dying out as the result of education of Employers and others.

435 children were examined by the Oculist during the year. The defects found were as follows :—

Squint	....	....	....	....	....	48
Myopia	....	....	....	....	....	69
Myopic Astigmatism	....	....	....	....	....	46
Mixed Astigmatism	....	....	....	....	....	10
Hypermetropia	....	....	....	....	....	69
Hypermetropic Astigmatism	....	....	....	....	....	141
Other Defects	....	....	....	....	....	28
Emmetropia	....	....	....	....	....	24
Total						435

Glasses were prescribed for 332 children.

Until 16 February, Dr. W. S. Thacker-Neville carried out this special work after which date Dr. A. T. Paterson who had formerly been the School Oculist resumed the appointment.

Throughout the year there has been a gratifying attendance at this Special Clinic and most of the spectacles prescribed have been promptly obtained.

Many children included under the heading of “ other defects ” have attended for weekly treatment over a prolonged period. The Special Clinic is concerned not merely with the provision of glasses but for advice and treatment of all eye diseases and defects. A few cases have been referred to Hospital for operation or other special treatment.

There has been much more work available than could be accomplished in one session per school week and arrangements have now been sanctioned for a further weekly session.

It is essential that when spectacles have been provided the children should be re-examined every year because as the child grows the eyes grow and with this natural growth the spectacles will in all probability require alteration in the same manner that a growing child requires a different size, in boots for example. These re-examinations can only be done by setting apart extra sessions.

Again, as the parents begin to appreciate the value of Specialist advice, the demand for such shows a natural increase and calls for more sessions.

DENTAL DEPARTMENT.

I am indebted to Mr. J. L. Liddell for the following report:—

This year the number of inspections has increased by 1,022 and the number of children treated has decreased by 52. I have noticed that an increasing number are having the work done privately. The number requiring treatment was found to be 4,870, making the percentage of those treated 48.5, against 53 per cent the previous year.

The number of operations performed on permanent teeth was 1,693, showing a drop of 242 compared with last year, and 50 with 1926, indicating that the work done in previous years is reducing the number of defective teeth in the permanent dentition. Since my appointment to this post the aim of my scheme has been to turn out as many children, when leaving school, with as healthy and functional mouths as possible.

Dr. Langdon of the Board of Education, in a paper read, on November 17th, 1928, before the Public Dental Officers Group of the British Dental Association, formulated two basic principles.

Firstly, the main purpose of school dentistry is the preservation of the permanent teeth, and therefore work devoted to this purpose should take precedence of any other work.

Secondly, it is better to give complete treatment to one child than incomplete treatment to two.

I have endeavoured to act on these principles since beginning my work in this Borough, and that is why I begin my routine inspections at the age of seven.

The first permanent teeth appear at the age of $6\frac{1}{2}$ to 7 years and they continue to erupt at regular intervals of about one year until the age of 13. By a regular scheme of inspections and treatments during this period, decay, appearing in the permanent teeth, may be detected and eradicated by fillings in the early stage and septic temporary teeth removed to make way for their successors.

Of the 1,077 special cases dealt with, 353 were of ages 5 and 6. 27 should have been treated after routine inspection, but did not avail themselves of the opportunity, and presented themselves later on with toothache.

The number of children who were re-treated during the year was 434, an increase of 151 over the previous year.

In addition to the work for elementary school children shown in Group IV of Table IV, of appendix, inspection and treatment were carried out for children attending the Secondary, Technical, and Special Schools:—

Number of children examined	....	....	494
Number of children requiring treatment			279
Number of children treated	....	....	79

This brings the grand total to :—

Number of children examined	....	....	7,558
Number of children requiring treatment			4,870
Number of children treated	....	....	2,364

38 root cases were treated, 35 of them successfully, the other three failing to attend for completion of the treatment.

May I take this opportunity to thank the Medical Officers, Teaching Staffs, Nurses, and Clinic Staff for their help and co-operation in my work throughout the year.

PHYSICAL TRAINING.

Co-operation between the School Medical Officer and the Organiser of Physical Training continues, each bringing to the notice of the other, cases where special treatment or exercises are required.

Physical Training in the Elementary Schools of the Borough was carried out during the year on the same lines as last year, and the standard of efficiency maintained.

The good results of the regular and systematic training is apparent in the well set-up and shapely bodies of the scholars. Cases of round shoulders, spinal curvature and flatfoot are very rare, largely due to the special care taken during lessons to emphasise the remedial movements specified in the "Tables." Constant attention has been given to the correct method of breathing and is still necessary, mouth-breathing being a common fault. Nasal breathing should be practised in **all** lessons and handkerchief "drill" frequently practised, especially in Junior and Infants' classes.

The scheme for providing better grounds for organised games, under consideration last year, did not materialise, so there is still room for improvement in this matter. However, some progress has been made. Part of the Alderman Leach School site is being levelled and will shortly be available for use. Steps are also being taken to level the playing ground in the South Park. The latter will be of great advantage when completed, as many schools, including the Junior Technical and Kendrew Street Central School boys, use the Park ground. These grounds, with the Hundens Lane Recreation Ground, when the proposed levelling has been carried out, will afford good and fairly adequate facilities for playing organised games.

Swimming instruction was carried out from May to September with the same teaching staff and under the same conditions as last year. Provision was made for dealing with 1,140 scholars per week from the Secondary Schools, Junior Technical and Senior Departments of the Elementary Schools. The extent to which the facilities provided at the Corporation Baths are used, is shown in the following table.

Year			Attendance		Certificates	
			Total	Average per week	One Length	Five Lengths
1928	Boys	...	7081	519	167	91
	Girls	...	6498	467	97	45
	TOTAL	...	13,579	986	264	136
1927	Boys	...	6,946	471	172	83
	Girls	...	7,004	506	94	37
	TOTAL	...	13,950	977	266	120

The Darlington Ladies' and Gentlemen's A.S. Clubs awarded the following certificates :—

$\frac{1}{4}$ mile	Boys	44	Girls	27	=	71	} = 116
$\frac{1}{2}$ "	"	25	"	11	=	36	
1 "	"	0	"	9	=	9	

The awards in 1927 were :—

$\frac{1}{4}$ mile	Boys	16	Girls	14	=	30	} = 51
$\frac{1}{2}$ "	"	15	"	6	=	21	

CO-OPERATION AND CO-ORDINATION.

The appointment of Medical Officer of Health and School Medical Officer are vested in one person so that Co-operation and co-ordination of all the preventive health services are simplified.

The transfer of records from the Maternity and Child Welfare Section through the School Medical side of the work, up to the Employment Exchange is in process of development.

The Training College and School Clinic.—In order that future school teachers may have a more intimate knowledge of the school medical work, arrangements for a number of pupils of the Training College to attend the Clinic three days per week have been continued for the past year. The principal and staff of the College very much appreciate this opportunity for the pupils to acquire a first hand practical knowledge of school hygiene, common diseases in their early form, and of simple points of the diagnosis and treatment of defects. The enthusiastic co-operation of the teaching profession with the school medical service is essential for the continued success of the welfare of the child, and all we can do in order to secure this is, in my opinion, an excellent service.

Co-operation of Parents.—Parents are invited to attend routine inspections and at the School Clinic. Their presence is welcomed as it gives the Medical Officer the opportunity of giving personal help and advice, and helps to break down prejudice which in some areas still exists. Suggestions can thus be made, both for the remedy of existing defects in the child, and also for the prevention of future ill-health by attention to what appear very trifling common-place weaknesses. During 1928, at the medical inspection of infants, parents were present in 76 per cent. of the cases, but with older children this percentage was 44 per cent. At the routine medical inspection of 3,065 elementary school children 1,624 parents attended, quite a satisfactory proportion.

Co-operation of Head Teachers and School Attendance Officers.
 (a) *Medical Inspection Generally.*—In the course of visitation by Attendance Officers of homes where excuses of illness are put forward as the cause of absence of children from school, the parents are instructed to obtain medical attention from the family doctor or at the School Clinic.

(b) *Following up of Children.*—The Attendance Office receive daily lists of children who have attended the Clinic, and reports as to their fitness to attend school. In the case of the unfit, the date for the next visit to the Clinic is given on the list for information. Further, a daily list is also furnished of children who should have attended the Clinic, but have failed to do so. The parents of the latter are promptly visited and warned as to the consequences of failure to attend as ordered.

I much appreciate the cordial co-operation of the Head Teachers. The success of the work is ultimately dependent on the enthusiasm of the teacher, and many an obstructing parent melts down under the moral suasion of the child's Teacher. The latter realises the immediate purpose of medical inspection is to fit the child for the education which he is ready to give.

Employment of Children and Young Persons.—The advice of the School Medical Officers is available for the Employment Officer, and at the final examination of a school child an effort is made to call the attention of the parents to any physical condition which should influence them in the choice of an occupation for the child.

The chief employment for boys in this area is in the Building and Engineering Trades. Owing to the continued trade depression few vacancies in these trades are being notified. Many boys seeking apprenticeships are compelled to find interim employment as errand boys and labourers.

Girls are employed in Domestic Service, Wool Spinning Shops, Offices, and in the Tailoring and Dressmaking Trades. Many apprentice Dressmakers and Tailoresses are now totally unemployed, and several are employed on unsystematic short time. Shop Assistants and Clerks have great difficulty in finding employment.

The Juvenile Employment Bureau is in touch with Employers in the district, and 324 children have through the agency been placed in employment. Suitable candidates are notified of vacancies in the Civil Service, Post Office, Army, Navy and Air Forces, the Railway and similar services.

Bye-laws governing the employment of children and young persons are in force, and the streets are patrolled by the School Attendance Officers. Minor offences are brought to light in a lenient manner and dealt with, but these irregularities are generally due to ignorance of, rather than intent to evade the Bye-laws.

SPECIAL SCHOOLS.

BARNARD SCHOOL FOR SUB-NORMAL CHILDREN.

After 25 years of service the old Special School premises in Gadyard had long outlived their usefulness, and the opening of the Barnard School in 1928 marked what may well prove to be the dawn of a new era in the provision of Special School facilities in the town.

The construction of the new school is ideal for its purpose. The three classrooms in the school are models of their kind. They are large, well lighted and ventilated, and adequately heated.

The walls are so constructed on the glass partition principle that in suitable weather they can be thrown fully open, while by an arrangement of floor level heating the children's feet are kept warm, permitting the general temperature of the rooms to be slightly lower than would otherwise be necessary.

A feature of the new building is the provision made for that practical side of the Curriculum which is of such importance to the future of the children it is designed to serve. In the kitchen premises the older girls are encouraged to take part in the preparation of the mid-day meal, at the same time learning in a pleasant way domestic routine, supervision of larder and scullery premises, and the like. Their instruction in household management is carried further by actual training in the admirable bedroom which has been furnished.

Ample garden ground has been provided and the boys are enjoying themselves ready pupils, anxious to outshine their neighbours in the production of flowers and vegetables.

With the improvement of the standard of the accommodation available an effort has been made to raise the standard of children referred to the school, and it cannot be too strongly emphasized that admission is reserved strictly to children who, in the opinion of the School Medical Officer, are capable of deriving benefit from instruction in the school. Imbeciles are not admitted, and every child taken into the school should have a fair prospect of obtaining some measure of economic success in later life.

Work at the school during the past year has been interrupted by the change over to the new premises and the steady influx of children consequent on the increase in size of the school. Sixty-one cases were enrolled during the year.

Miss Clegg continues to do splendid work at the school. The success which has attended her efforts in the past is a striking tribute to sterling work under most difficult conditions and augurs well for the future of the school under happier auspices.

For those children, whose grade of mental defect is so low that they are unable to derive benefit from their education at the special school, arrangements have been made with the Committee for the Welfare of Afflicted Persons, whereby Miss Holmes, recently appointed Supervisor, pays home visits or trains the defectives at an Occupation Centre held thrice weekly. The subjects taught include easy manual occupations, rug and mat making, basket and raffia work and general tidiness.

Thirty pupils have been so far enrolled in the Occupation Centre. The total number of mentally defective children of all grades is approximately 100.

Blind, Deaf, Defective and Epileptic Children.—The arrangements for dealing with these children remain as in previous years. 20 children were examined for Forms 302 and 306 during the year, and the total number of mentally defective children on the books was 69. 4 children were reported for admission to a Residential Special School; 7 were notified to the Local Authority under the Mental Deficiency Act.

These figures are summarised in Table III. of the Appendix.

THE GEORGE DENT NURSERY SCHOOL.

The George Dent Nursery School was visited every week and during the year each child was subjected to at least one full routine examination.

There are 80 children at present on the Register of this school. The children are all between the ages of 2 and 5 years and have been admitted to school for one of two reasons :

- (1) Poor home conditions.
- (2) Malnutrition with or without some definite physical defect.

This year again the waiting list is a long one and the accommodation of the school has been taxed to its utmost throughout the year, many suitable cases having to be refused admission.

The school is situated in Woodlands Road within easy distance of the centre of the town and on the main 'Bus route. The building is a two storey building of the dwelling house type with large airy rooms opening from a central hall. The house is situated in beautiful grounds and during the summer months the children live entirely out of doors from the time of arrival at school at 9-15 a.m., until they leave again at 3-45 p.m.

The problem of conveying the children to and from the school affords no difficulty under the present routine. As most of the children in attendance are drawn from the Eastbourne area of the town and inter-lying districts the School Authorities have arranged a central meeting place within easy reach of all parents and there the children are met daily by members of the School Staff and conveyed free of charge by special trolley bus to the gates of the school.

On arrival at school each child is given lunch—brown bread and butter, milk, and during the winter, Cod Liver Oil is administered to each child. Twelve o'clock is dinner time—served indoors in winter and out of doors in the fine summer weather and after dinner every child has two hours rest, being provided with a camp bed and blanket.

At 3-45 p.m., they are conveyed back again under supervision to the central meeting place when they are met by their parents.

There is no doubt whatsoever as to the beneficial results, both physically and mentally, shown in the children in attendance at the school and it is to be very much regretted that there is in the school accommodation for only 80 children when one realises the wide field there is for preventive medical activity during the period of the child's attendance there.

46 children were examined on admission, 131 were re-examined and 25 were examined as special cases.

8 children received treatment at the School Dental Clinic; 1 case of tonsils and adenoids, and 1 case of mastoid suppuration were operated on at the General Hospital. All minor ailments were treated at the school by the staff.

In several of the elementary schools where accommodation is available, children are admitted before attaining the statutory age of five years. These children have the advantage of medical inspection and treatment at a time when the defects are most remediable.

OPEN AIR SCHOOL.

There is little to add to the report of last year on the work of the Open Air School. The results obtained have been cramped by the inadequate nature of the school buildings available : and the poverty of accommodation has been accentuated during the year by handing over one of the two classrooms of the Open Air School to Dodmire School, a step necessitating the temporary transfer to ordinary schools of several children who might well have benefited from more prolonged stay in the Open Air School.

The scheme of continuous medical supervision has remained in operation during the year, and gratifying improvement has been noted in the physical condition of the children whom it was possible to admit during the year. There were 55 girls on roll at the end of the year.

The need for the provision of Open Air School accommodation for ailing boys has been noted in previous reports, and there can be no doubt that the new school at present under construction at Harrowgate Hill will be a valuable asset to the medical resources of the town. There will be accommodation for 60 boys and an equal number of girls.

A permanent main administrative building consisting of a central large dining and assembly hall and kitchen flanked on either side by staff rooms, cloak rooms, store-rooms and spray baths, faces south on a high open site of 4 acres. In front of this four class rooms of a semi-permanent nature are arranged in echelon and with all sides open so that a maximum of the essential fresh air and sunlight is available. Ample provision of lawns, play ground, and gardens has been made, so that there will be excellent scope for variety of out-door training and occupations.

The Open Air School is the finest fighting weapon we have against Tuberculosis, as it tackles the problem in the early malnutrition stage before the seed has obtained a foot-hold in the seed-bed.

SECONDARY SCHOOLS.

Grammar School (Boys).—Three routine medical inspections by Dr. Ferguson were carried out during the year. Special medical examinations were made of those pupils engaging more strenuously than the others in sports, in order that signs of physical strain should not be overlooked. Of the work the Headmaster, Mr. Taylor writes :—

The Schools Medical Service continued to give great help to the Grammar School, and is undoubtedly proving a boon to parents. The health of the School is showing an improvement and the physique of the boys has increased markedly since the advent of the School Doctor and the Gymnasium.

High School (Girls).—The High School for girls was visited three times during the year when Routine Inspections of the pupils and attendance were carried out.

This year marks the opening of the Preparatory Department at the school and all children entering the Department were also subjected to Routine Inspection.

The physical condition of the pupils was found to be excellent and it is gratifying to note that, despite the increasing strain of pressure of homework, and of preparation for examinations, a progressive improvement in the physical condition and general health of the pupils among the higher forms is shown. This satisfactory condition is attributed almost entirely to the high standard of personal hygiene maintained in the schools and to the efficiency with which the organized games and physical training are carried out.

In regard to re-inspections of pupils found to be suffering from one or more defects, it is found that a great deal has been done and the work shows even more satisfactory results than in the elementary schools, as the pupils, being older, are more interested and are able to appreciate the need for physical fitness and the relationship of any defect, to their future careers.

A large proportion of cases of defects were found to be those of vision—which is, of course, accounted for by the fact that increased strain of secondary education brings such defects into greater prominence.

The Medical Officer is pleased to note the increase in attendance of parents at the inspections, and to find that the parents are now, in most cases, anxious to have any defect remedied without delay.

During the past few years the attitude of the pupils and parents towards Medical Inspection has altered considerably. The former feeling was one almost amounting to resentment but this is being gradually replaced by one of real interest, and objection to inspection is here, as in other schools, practically unknown.

		<i>Pupils Attending</i>	<i>Pupils Examined</i>
Grammar School	....	380	.... 291
Girls' High School	....	337	.... 290
Junior Technical School		156	.... 125
Central Secondary School		336	.... 297
Total		1209	.... 1003

At the ages specified by the Board of Education the examinations were as follows:—

Age ...	8	12	13	14	15	16	17	Total
Boys ...	17	59	189	128	71	35	9	508
Girls ...	8	33	106	88	52	35	18	340

In addition to these, special cases were examined at the following ages:—

Age	7	9	10	11	Total
Boys	5	6	10	52	73
Girls	3	5	16	52	76

Number of pupils in whom no defect was found, 487.

The inspections were carried out on much the same lines as in the Elementary Schools, with the addition of chest measurements.

The following table gives the average chest measurements in inches :—

	Age 8		Age 12		Age 13		Age 14	
	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls
Inspiration	25·6	25·8	28·0	29·2	28·6	30·1	29·2	32·3
Expiration	24·0	23·5	25·8	26·8	26·2	27·4	26·6	29·4

	Age 15		Age 16		Age 17	
	Boys	Girls	Boys	Girls	Boys	Girls
Inspiration	30·4	33·7	31·5	33·6	32·3	34·7
Expiration	27·6	30·8	28·6	30·9	29·5	32·2

The following defects were found during the course of medical inspection :—

Disease or Defect	Age 8		Age 12		Age 13		Age 14		Age 15		Age 16		Age 17		Total
	B	G	B	G	B	G	B	G	B	G	B	G	B	G	
Carious Teeth (four or more)	-	-	-	1	1	3	3	4	-	3	-	1	-	-	16
Enlargement of Tonsils	-	-	-	4	2	5	6	1	-	3	-	2	1	-	24
Adenoids	-	1	1	4	3	2	5	1	1	3	-	2	-	-	23
Enlargement of Glands	-	-	1	6	6	6	5	1	8	3	-	-	1	1	38
Squint	-	-	-	-	-	2	-	-	-	-	-	-	-	-	2
External Eye Disease	-	-	-	-	1	1	-	1	2	2	-	-	-	-	7
Defective Vision	-	-	10	12	19	41	19	8	13	8	5	10	-	4	149
Ear Discharge	-	-	1	2	1	1	-	1	-	1	-	-	-	-	7
Deafness	-	-	-	-	-	1	2	1	1	-	-	1	-	-	6
Defective Speech	-	-	-	2	2	-	2	-	-	-	1	-	1	-	8
Other Diseases	-	1	8	21	38	42	27	33	18	37	10	25	3	14	277

Defects found and referred for treatment, or to be kept under observation :—

Defect or Disease	Routine Inspection				Re-examinations			
	Treat- ment		Observa- tion		Treat- ment		Observa- tion	
	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls
Uncleanliness (Head) ...	—	1	—	—	—	2	—	1
Eye—								
Blepharitis	—	—	—	2	—	1	—	—
Corneal Ulcer	—	—	—	—	—	—	—	—
Defective Vision	2	33	6	24	15	36	4	15
Squint	—	3	—	—	—	—	—	1
Ear—								
Defective Hearing ...	1	3	—	2	—	2	1	6
Nose and Throat—								
Enlarged Tonsils	—	22	—	14	13	23	7	3
Adenoids	6	3	1	3	3	6	2	—
Enlarged Cervical Glands (non- Tuberculous) ...	—	3	—	5	—	1	—	10
Heart Disease—								
Organic	—	1	7	2	—	1	6	4
Functional... ..	—	1	6	3	—	—	4	1
Anæmia	—	8	—	14	1	11	—	10
Lungs	1	4	7	25	3	1	4	21
Other Non-Tuberculous Diseases	—	—	—	—	—	—	—	1
Tuberculosis—								
Pulmonary—Definite	—	—	—	—	—	—	—	—
Suspect.	—	—	—	—	—	—	—	—
Non-Pulmonary—								
Spine	—	—	—	—	—	—	—	—
Other forms ...	—	—	—	—	—	—	—	—
Deformities—								
Rickets	—	—	—	—	—	1	—	1
Dental Caries	4	33	2	3	14	25	4	—
Skin—								
Scabies	—	1	—	—	1	—	—	—
Other Defects or Diseases	4	25	4	36	7	17	13	44

No. of Re-examinations carried out to ascertain progress, 260

RETURN OF MEDICAL INSPECTIONS--1928.

TABLE 1.

A.—ROUTINE MEDICAL INSPECTIONS.

Number of Code Group Inspections—

Entrants	1,007
Intermediates	1,286
Leavers	772
<hr/>						
Total	3,065
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Number of other Routine Inspections 322

B.—OTHER INSPECTIONS.

Number of Special Inspections	2,631
Number of Re-Inspections ....	....	....	....	....	9,536
<hr/>					
Total	....	....	....	....	12,167

TABLE II.—A. Return of Defects found by Medical Inspection in the Year ended 31st December, 1928.

DEFECT OR DISEASE	ROUTINE INSPECTIONS		SPECIAL INSPECTIONS	
	No. of Defects		No. of Defects	
	Requiring Treatment	Requiring to be kept under observation but <i>not</i> requiring Treatment	Requiring Treatment	Requiring to be kept under observation but <i>not</i> requiring Treatment
(1)	(2)	(3)	(4)	(5)
Malnutrition... ..	—	19	—	1
Uncleanliness (See Table IV., Group V.)	192	—	4	—
SKIN—				
Ringworm :				
Scalp	7	—	—	—
Body	3	—	—	—
Scabies	1	—	—	—
Impetigo	36	—	18	—
Other Diseases (Non-Tuberculous) ...	12	9	7	—
EYE—				
Blepharitis	28	5	1	—
Conjunctivitis	2	—	1	—
Keratitis	1	—	—	—
Corneal Opacities	2	—	—	—
Defective Vision (excluding Squint)	177	129	64	10
Squint	31	37	—	1
Other Conditions	7	3	4	—
EAR—				
Defective Hearing	7	16	5	3
Otitis Media	21	4	9	1
Other Ear Diseases	2	5	1	1
NOSE AND THROAT—				
Enlarged Tonsils only ...	83	258	5	4
Adenoids only	38	49	5	1
Enlarged Tonsils & Adenoids	31	42	1	2
Other Conditions	—	16	—	4
Enlarged Cervical Glands (Non-Tuberculous) ...	4	100	1	—
Defective Speech	—	12	—	3
Teeth—Dental Diseases ...	520	4	9	—
(See Table IV., Group IV.)				
HEART & CIRCULATION—				
Heart Disease :				
Organic	—	34	—	—
Functional	—	31	—	—
Anaemia	1	32	—	1
LUNGS—				
Bronchitis	5	494	—	7
Other Non-Tuberculous Diseases	—	—	—	—

TABLE II.—*continued.*

DEFECT OR DISEASE	ROUTINE INSPECTIONS		SPECIAL INSPECTIONS	
	No. of Defects		No. of Defects	
	Requiring Treatment	Requiring to be kept under observation but <i>not</i> requiring Treatment	Requiring Treatment	Requiring to be kept under observation but <i>not</i> requiring Treatment
(1)	(2)	(3)	(4)	(5)
TUBERCULOSIS—				
Pulmonary :				
Definite	5	5	—	1
Suspected	—	—	—	—
Non-Pulmonary :				
Glands	3	3	—	—
Spine	—	—	—	—
Hip	—	—	—	—
Other Bones & Joints ...	—	1	—	—
Skin	—	1	—	—
Other Forms	—	1	1	—
NERVOUS SYSTEM—				
Epilepsy	—	2	—	2
Chorea	3	3	1	—
Other Conditions	—	2	—	1
DEFORMITIES—				
Rickets	3	32	—	—
Spinal Curvature	—	5	—	1
Other Forms	4	16	1	—
Other Defects & Diseases ...	28	183	13	18

B. Number of *individual children* found at *Routine Medical Inspection* to require treatment (excluding Uncleanliness and Dental Diseases).

GROUP	NUMBER OF CHILDREN		Percentage of Children found to require Treatment
	Inspected	Found to require Treatment	
(1)	(2)	(3)	(4)
CODE GROUPS :—			
Entrants	1,007	144	14·3
Intermediates	1,286	164	12·7
Leavers	772	146	18·9
Total (Code Groups)	3,065	454	14·8
Other Routine Inspections ...	524	31	5·9

TABLE III.—Return of all Exceptional Children in the Area.

—		Boys	Girls	Total
Blind (including partially blind).	(i.) Suitable for training in a School or Class for the totally blind.	1	2	3
		—	—	—
		—	—	—
		—	—	—
		—	—	—
Deaf (including deaf and dumb and partially deaf).	(ii.) Suitable for training in a School or Class for the partially blind.	—	—	—
		3	3	6
		—	—	—
		—	—	—
		—	—	—
Mentally Defective.	(i.) Suitable for training in a School or Class for the totally deaf or deaf and dumb.	—	3	3
		—	—	—
		—	—	—
		—	—	—
		—	—	—
	(ii.) Suitable for training in a School or Class for the partially deaf.	3	1	4
		—	—	—
		—	—	—
		—	—	—
		—	—	—
	Feeble-minded (cases not notifiable to the Local Control Authority) ¹	35	34	69
		6	3	9
		2	—	2
		—	—	—
		—	—	—
	Notified to the Local Control Authority during the year.	2	2	4
		2	1	3
		—	—	—
		—	—	—
		—	—	—
Attending Certified Special Schools for Epileptics		—	—	—

Epileptics (continued).	Suffering from epilepsy which is not severe.	Attending Public Elementary Schools... At no School or Institution	Boys	Girls	Total
Physically Defective.	Infectious pulmonary and glandular tuberculosis.	At no School or Institution	7	5	12
		At no School or Institution	—	—	—
		At Sanatoria or Sanatorium Schools approved by the Ministry of Health or the Board	8	2	10
		At other Institutions	—	—	—
	Non-infectious but active pulmonary and glandular tuberculosis.	At no School or Institution	5	4	9
		At no School or Institution	—	—	—
		At Sanatoria or Sanatorium Schools approved by the Ministry of Health or the Board	—	—	—
		At Certified Residential Open-Air Schools	—	—	—
		At Certified Day Open-Air Schools	—	1	1
		At Public Elementary Schools	24	20	44
Physically Defective.	Delicate children (e.g., pre or latent tuberculosis, malnutrition, debility, anæmia, etc.).	At other Institutions	—	—	—
		At no School or Institution	—	1	1
		At no School or Institution	—	—	—
		At Certified Residential Open-Air Schools	—	—	—
	Active non-pulmonary tuberculosis.	At Certified Day Open-Air Schools	—	55	55
		At Public Elementary Schools	9	6	15
		At other Institutions	—	—	—
		At no School or Institution	—	—	—
	Crippled Children (other than those with active tuberculous disease), e.g., children suffering from paralysis, etc., and including those with severe heart disease.	At Sanatoria or Hospital Schools approved by the Ministry of Health or the Board	—	1	1
		At Public Elementary Schools	3	4	7
		At other Institutions	—	1	1
		At no School or Institution	—	1	1
Physically Defective.	Crippled Children (other than those with active tuberculous disease), e.g., children suffering from paralysis, etc., and including those with severe heart disease.	At no School or Institution	—	—	—
		At Certified Hospital Schools	—	—	—
		At Certified Residential Cripple Schools	—	—	—
		At Certified Day Cripple Schools	—	—	—
	Crippled Children (other than those with active tuberculous disease), e.g., children suffering from paralysis, etc., and including those with severe heart disease.	At Public Elementary Schools	28	34	62
		At other Institutions	—	—	—
		At no School or Institution	3	1	4
		At no School or Institution	—	—	—
	Crippled Children (other than those with active tuberculous disease), e.g., children suffering from paralysis, etc., and including those with severe heart disease.	At no School or Institution	—	—	—
		At Certified Hospital Schools	—	—	—
		At Certified Residential Cripple Schools	—	—	—
		At Certified Day Cripple Schools	—	—	—

TABLE IV.—Returns of Defects Treated during the Year ended 31st December, 1928.**TREATMENT TABLE.**

GROUP I.—MINOR AILMENTS (excluding Uncleanliness, for which see Group V.).

DISEASE OR DEFECT (1)	Number of Defects treated or under treatment during the year		
	Under the Authority's Scheme (2)	Otherwise (3)	Total (4)
SKIN—			
Ringworm—Scalp	69	3	72
Ringworm—Body	68	1	69
Scabies	33	1	34
Impetigo	1,018	5	1,023
Other Skin Disease	152	4	156
MINOR EYE DEFECTS			
(External and other, but excluding cases falling in Group II.).	177	3	180
MINOR EAR DEFECTS	156	8	164
MISCELLANEOUS			
(e.g., minor injuries, bruises, sores, chilblains, etc.).	560	19	579
Total	2,233	44	2,277

GROUP II.—DEFECTIVE VISION AND SQUINT (excluding Minor Eye Defects treated as Minor Ailments—Group I.).

DEFECT OR DISEASE (1)	No. of Defects dealt with			
	Under the Authority's Scheme (2)	Submitted to Refraction by private practitioner or at hospital, apart from Authority's Scheme (3)	Otherwise (4)	Total (5)
Errors of Refraction (including Squint) (Operations for squint should be recorded separately in the body of the Report)	415	5	10	430
Other Defect or Disease of the Eyes (excluding those recorded in Group I.).	20	—	—	20
Total	435	5	10	450

Total number of children for whom spectacles were prescribed—

(a) Under the Authority's Scheme, 332. (b) Otherwise, 15

Total number of children who obtained or received spectacles—

(a) Under the Authority's Scheme, 302. (b) Otherwise, 15

TABLE IV.—*continued.*

GROUP III.—TREATMENT OF DEFECTS OF NOSE AND THROAT.

NUMBER OF DEFECTS

Received Operative Treatment			Received other forms of Treatment	Total number Treated
Under the Authority's Scheme, in Clinic or Hospital	By Private Practitioner or Hospital, apart from the Authority's Scheme	Total		
(1)	(2)	(3)	(4)	(5)
91	121	212	112	324

GROUP IV.—DENTAL DEFECTS.

(1) Number of children who were :—				(2) Half-days devoted to :—
(a) Inspected by the Dentist :				Inspection, 60 ; Treatment, 327 ;
Aged :				Total, 387.
Routine Age Groups	5 ...	—	} Total, 5987	(3) Attendances made by children for treatment, 2728.
	6 ...	11		
	7 ...	1117		
	8 ...	1331		
	9 ...	929		
	10 ...	66		
	11 ...	829		
	12 ...	851		
Specials	13 ...	846		(4) Fillings :—
	14 ...	7		
Total, 5987				Permanent Teeth, 566 ; Temporary Teeth, 0 ;
				Total, 566
(5) Extractions :—				(6) Administrations of general anaesthetics for extractions, 0.
Permanent Teeth, 692 ; Temporary Teeth, 3493 ;				
Total, 4185				(7) Other operations :—
(b) Found to require treatment ... 4591				
(c) Actually treated ... 2285				Permanent Teeth, 435 ; Temporary Teeth, 38 ;
(d) Re-treated during the year as the result of periodical examination ... 434				Total 473.

GROUP V.—UNCLEANLINESS AND VERMINOUS CONDITIONS.

- (i.) Average number of visits per school made during the year by the School Nurses, 17.45
- (ii.) Total number of examinations of children in the Schools by School Nurses, 17,076.
- (iii.) Number of individual children found unclean, 622.
- (iv.) Number of children cleansed under arrangements made by the Local Education Authority, —.
- (v.) Number of cases in which legal proceedings were taken :—
 - (a) Under the Education Act, 1921, —.
 - (b) Under School Attendance By-Laws, —.

TABLE V.—Dental Examinations.

SCHOOL	No. of Children examined			No. requiring treatment			No of parents consenting to treatment	Per-centage
	Boys	Girls	Total	Boys	Girls	Total		
Albert Road ...	219	236	455	132	140	272	110	40·4
Alderman Leach ...	48	61	109	30	31	61	18	29·5
Arthur Pease ...	17	66	83	8	38	46	8	17·4
Beaumont Street	182	263	445	94	144	238	71	29·9
Bondgate ...	133	65	198	98	52	150	55	36·6
Borough Road ...	159	136	295	104	84	188	48	25·5
Cockerton ...	100	88	188	63	49	112	53	47·3
Corporation Road	186	470	656	100	276	376	118	32·0
Dodmire ...	165	172	337	109	110	219	76	34·7
Gurney Pease ...	64	50	114	50	33	83	15	18·0
Harrowgate Hill	271	223	494	161	121	282	96	34·0
Holy Trinity ...	44	60	104	35	38	73	17	23·3
Kendrew Street ...	36	38	74	25	23	48	24	50·0
North Road ...	122	128	250	84	87	171	77	45·0
Open-Air ...	—	34	34	—	19	19	7	36·8
Reid Street ...	486	139	625	232	93	325	133	40·9
Rise Carr ...	171	145	316	107	92	199	73	36·6
Barnard ...	25	24	49	13	8	21	5	23·8
St. Augustine's ...	238	269	507	158	159	317	84	26·5
St. Cuthbert's ...	56	42	98	41	27	68	14	20·5
St John's ...	212	183	395	134	117	251	66	26·2
St. William's ...	49	62	111	33	46	79	24	30·3
Central Secondary	32	33	65	22	21	43	8	18·6
Junior Technical...	131	—	131	69	—	69	18	26·0
Grammar ...	156	—	156	98	—	98	31	31·6
High ...	—	59	59	—	29	29	10	34·5
Kendrew St. C. ...	133	—	133	83	—	83	28	33·7
Total ...	3435	3046	6481	2083	1837	3920	1287	32·8

